

# APPLICATION FOR EMPLOYMENT

**RETURN TO:**  
 CITY OF OAKLEY  
 Human Resources Division  
 3231 Main Street  
 Oakley, CA 94561  
 925-625-7011



*for City Use Only*

Received: \_\_\_\_\_

Reviewer: \_\_\_\_\_

Qualified Not Accepted

Late Incom Ed/Exp

Other: \_\_\_\_\_

***The City of Oakley is an Equal Opportunity Employer***

*Review the minimum qualifications listed on the job announcement. If you feel you meet the minimum qualifications, complete and submit the application. Answer all questions completely and accurately. **A RESUME WILL NOT SUBSTITUTE FOR THE INFORMATION REQUESTED**, and please **do not write "see Resume."** The answers you provide will determine whether or not you will continue in the screening process.*

*Your completed application, combined with any supplementary materials specified on the job announcement, **MUST** be received by Human Resources by the date and time (Pacific Time) specified on the job announcement. Electronically sent applications are accepted at [hr@ci.oakley.ca.us](mailto:hr@ci.oakley.ca.us). We are not responsible for materials lost or delayed in the mail or by electronic transmission. An incorrect or incomplete, outdated, or unsigned application may bar your application from being processed. Notify Human Resources prior to the closing date if you require a reasonable accommodation during the testing process.*

**POSITION APPLYING FOR:** \_\_\_\_\_

**PERSONAL INFORMATION**

Name: \_\_\_\_\_

	Last	First	Middle
--	------	-------	--------

Address: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_

Cell Phone: (     ) \_\_\_\_\_

Message Phone: (     ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

---

Can you provide proof that you are legally allowed to work in this country?  Yes  No

Do you possess a valid California Driver's License?  Yes  No  
 If YES, License No.: \_\_\_\_\_ Class: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Have you ever been employed by the City of Oakley?  Yes  No

Do you have relatives employed by the City of Oakley?  Yes  No  
 If YES, state name(s) and relationship \_\_\_\_\_

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age)  Yes  No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? If no, please describe the function(s) that cannot be performed:  Yes  No

May we contact you at work?  Yes  No

Do you speak, read or write any foreign languages?  Yes  No  
 If YES, which language(s): \_\_\_\_\_

Do you presently use illegal drugs?  Yes  No

Are you currently awaiting trial on any charges?  Yes  No

Do you wish to claim Veteran's Preference? If applicable? To be considered, you must submit copy of your discharge papers (DD214)  Yes  No

## BACKGROUND

### Background Acknowledgement

Yes     No

As part of the employment process, you may be required to undergo a background investigation. You understand that by checking "yes," you consent to the City of Oakley performing any applicable background investigation relevant to the position. You also understand that such information will remain confidential and will not necessarily preclude you from employment.

**Pursuant to AB218, the City of Oakley will no longer request conviction information or proof of safe driving record at the time of application submission for paid employment.** Only candidates who pass the application screening process and meet minimum qualifications will be required to provide conviction information to Human Resources. Conviction information will still be required with initial application for any position where a criminal background check is required by law or exempt from AB 218. However, the City will not ask about marijuana-related convictions under California Health and Safety Code sections 11357(b), 11360(b), 11364, 11365, or 11550 if more than two years have passed from the date of conviction, except where permitted by law.

Upon request for conviction information by the Human Resources Division, failure to disclose misdemeanor or felony convictions will result in denial of employment. Newly hired employees are subject to being fingerprinted to verify conviction history, prior to start to work.

Pursuant to California Public Resources Code Section 5164, the City is prohibited from hiring an employee or volunteer to perform services at a park, playground or recreation center, in a position having supervisory or disciplinary authority over any minor, when that person has been convicted of specified offenses.

### Resignation Discharge/Release

Yes     No

Have you ever been rejected during a probationary period, discharged, or forced to resign from any employment within the last twenty (20) years? If YES, give the name of the employer(s), reason for each release and dates of employment. If answer is YES, is not necessarily a bar to employment. Each case is given individual consideration based on the job relatedness.

Employer(s): \_\_\_\_\_ and reason(s): \_\_\_\_\_

## EDUCATION, TRAINING, AND EXPERIENCE

*Describe fully any business, trade, or other education (verification of education may be requested)*

Select the Highest Grade Completed	Name of School	Location (City, State)	Graduate
<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12			<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If No, do you have a G.E.D., California High School Proficiency Certificate or equivalent?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</i>			

College, Business or Trade School Attended	Dates	Degree	Major Subject(s)	No. of Units Completed

**Computer Literacy:** Check the software you are adept at using or are skilled in:

- |                                     |                                  |                                       |
|-------------------------------------|----------------------------------|---------------------------------------|
| <input type="checkbox"/> Access     | <input type="checkbox"/> Excel   | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Outlook    | <input type="checkbox"/> MS Word | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> PowerPoint | <input type="checkbox"/> Windows |                                       |

Describe fully any job-related skills, knowledge, special training, certificates or licenses you may possess which are relevant to the position applied for. (Attach additional sheets, as necessary).


## EMPLOYMENT HISTORY

In the spaces provided, give your complete record of employment during the last fifteen (15) years. Start with your present or most recent position and work back. List your positions in the order you held them. Explain all gaps in employment. If you wish, you may include experience more than fifteen years ago and **use additional sheets, if necessary**. Voluntary non-paid experience will be accepted if job related. A resume or other supporting documentation may be attached, but it may **not** be used as a substitute for completing this section. Please do not leave any line blank.

FROM (MO/YR):	TO (MO/YR):	EMPLOYER:	TITLE:
TOTAL TIME:		ADDRESS:	
HOURS PER WEEK:		DUTIES:	
FINAL SALARY:			
NAME OF SUPERVISOR AND PHONE NO.			NO. EMPLOYEES SUPERVISED:
REASON FOR LEAVING OR SEEKING A JOB CHANGE AT THIS TIME:			

FROM (MO/YR):	TO (MO/YR):	EMPLOYER:	TITLE:
TOTAL TIME:		ADDRESS:	
HOURS PER WEEK:		DUTIES:	
FINAL SALARY:			
NAME OF SUPERVISOR AND PHONE NO.			NO. EMPLOYEES SUPERVISED:
REASON FOR LEAVING OR SEEKING A JOB CHANGE AT THIS TIME:			

FROM (MO/YR):	TO (MO/YR):	EMPLOYER:	TITLE:
TOTAL TIME:		ADDRESS:	
HOURS PER WEEK:		DUTIES:	
FINAL SALARY:			
NAME OF SUPERVISOR AND PHONE NO.			NO. EMPLOYEES SUPERVISED:
REASON FOR LEAVING OR SEEKING A JOB CHANGE AT THIS TIME:			

REMARKS: (Attach other sheets, as necessary)

## REFERENCES

List three people, **other than relatives and previous employers**, who have knowledge of your competence in the field for which you are applying.

Name	Relationship to Applicant	Address	Telephone Number
1.			
2.			
3.			

**Answer this question ONLY when the position applying for is with the Police Department or the Recreation Division. If not, please DISREGARD and move on to the Acknowledgement section.**

Have you ever plead guilty or “no contest” to, or been convicted of, a misdemeanor or felony?  Yes  No

If YES, please give the date(s) and details: \_\_\_\_\_

*Note:* Answering “yes” to this question is not an automatic bar to employment. Each case is considered on its own merits. Do not include minor traffic infraction, convictions where the record has been sealed or expunged, any conviction where probation was successfully completed or otherwise discharged and the case has been judicially dismissed, referrals to any participation in pre-trial or post-trial diversion program. For employees seeking a position in the Recreation Division, this question does not apply to marijuana-related convictions under California Health and Safety Code sections 11357(b), 11360(b), 11364, 11365, or 11550, if more than two (2) years have passed from the date of conviction.

## ACKNOWLEDGEMENT, AUTHORIZATION AND AGREEMENT

**(Important - Please Read Before Signing)**

I certify that all statements contained herein or submitted to the City of Oakley as part of this application are true to the best of my knowledge, and I agree and understand that any misstatements or omission of material facts contained herein or in any material submitted as part of the application process (for example, medical reports, certifications, licenses, school transcripts, etc.) regardless of when discovered, may result in the disqualification of my application, if said information is discovered after I have become an employee of the City of Oakley, it may lead to the termination from my position.

I further agree and understand that my application to the City of Oakley is contingent upon my signing a “Waiver and Release of Information,” which will allow the City of Oakley to obtain information about my application and background from sources such as schools, former employers and other individuals. I further agree to undergo any job related physical examination and drug screening upon conditional offer of employment. The physical exam and/or drug screening will be paid for by the City of Oakley. If successful completion of a drug screening test is not obtained, I understand I will not be eligible for hire with the City of Oakley.

This application is the property of the City of Oakley and will become part of my personnel file if I am hired.

APPLICANT'S SIGNATURE:	DATE:
------------------------	-------

The City of Oakley is an equal opportunity employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.



## EQUAL EMPLOYMENT OPPORTUNITY SURVEY

**APPLICANT:** Please complete this form and submit it with your application. The completed form is confidential and will be separated from your application. This information is voluntary and is gathered in accordance with State and Federal laws for the purpose of evaluating the effectiveness of our Equal Employment Opportunity policy and recruitment efforts.

Title of position you are applying for: \_\_\_\_\_

Reasonable accommodation requests may be made at any stage of the recruitment and selection process. If you require reasonable accommodation, please contact the Human Resources office to request such accommodation.

How did you learn of this recruitment? (Please check only one)

<input type="checkbox"/>	City of Oakley employee
<input type="checkbox"/>	City of Oakley website
<input type="checkbox"/>	City of Oakley social media platform ( Facebook, Twitter, Nextdoor)
<input type="checkbox"/>	City of Oakley e-newsletter ( <i>Oakley Outreach</i> )
<input type="checkbox"/>	Friend/Relative
<input type="checkbox"/>	Walk-in
<input type="checkbox"/>	Internet (specify website)
<input type="checkbox"/>	An Organization or Group, specify
<input type="checkbox"/>	Newspaper, Publication (specify which one):
<input type="checkbox"/>	Other (please specify):

A. Please indicate gender  Male  Female

B. Are you age 40 or above?  Yes  No

C. Please indicate ethnic origin (check one)

- Hispanic or Latino:** a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- White:** a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American:** a person having origins in any of the origins in any of the black racial groups of Africa.
- Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- American Indian or Alaska Native:** a person having origins in any of the original people of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Two or More Races:** a person who primarily identifies with two or more of the above race/ethnicity categories
- I do not wish to disclose.**