

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer

City of Beverly Hills is an equal opportunity employer and considers all persons for employment regardless of race, color, religion, gender, national origin, age, disability, veteran status, sexual orientation, marital status, or status in any group protected by federal, state, or local law. No question on this application is intended to secure information to be used for discriminatory purposes.

This application will be considered only for the position indicated below, providing the positions are open at time of application submission. Receipt of this application does not imply that the applicant will be employed. City of Beverly Hills hires only United States citizens and aliens lawfully authorized to work in the United States. All new employees will be required to certify that they are eligible for employment in the United States.

Desired Employment

Position applying for:	Date available to start:	Salary desired:
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, may we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever applied with the City before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, when?	
Have you ever worked for the City before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, when? What department? What was your supervisor's name?	
Reason for leaving:		
Are you related by kinship or marriage to any City of Beverly Hills employee or City Council Member? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please give name, relationship and department:		
Who referred you to the City? <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Friend <input type="checkbox"/> State Employment Office <input type="checkbox"/> Walk in <input type="checkbox"/> Other _____		

Personal Information

Last Name	First Name	MI	Social Security #:	Do you have a legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address	City	State	Zip Code	
Driver's License Number	State	Expiration Date	Check Type of License <input type="checkbox"/> Operator <input type="checkbox"/> Commercial <input type="checkbox"/> Chauffeur <input type="checkbox"/> Class C <input type="checkbox"/> Class B <input type="checkbox"/> Class A	
List all traffic accidents and moving violations in the last three (3) years.				
Home phone:		Additional Contact Number:		
Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, employment is subject to verification of age.				E-mail address:

Education and Training

What is the highest grade in school you completed? Did you graduate from High School ? ☐ Yes ☐ No Or receive a GED? ☐ Yes ☐ No
Name and City, State of high school: _____

Type of School	Name and Location Of School	Dates Attended From / To	Did you Graduate?	Degree Type	Major / Minor
Undergraduate Colleges or Universities					
Graduate Schools					
Technical, Vocational, or Business School					

General

Subjects of special study or research work:
Special Training:
Special Skills:

Criminal History Disclosure Instructions

Please read the instructions carefully before answering questions regarding criminal history. For these instructions, the words “convicted” and “conviction” include guilty pleas and pleas of “nolo contendere” or “no contest.” If you question whether your conviction is excluded, consult your own attorney. You are responsible for accurately responding to questions about your criminal history. This instruction applies to both adult and juvenile records, and to both felony and misdemeanor convictions. You may answer as if you have no record if:

- The record has been sealed, expunged, or statutorily eradicated. This includes convictions that are judicially dismissed or discharged prior to a final adjudication of guilt.
- Your arrest resulted in a diversion program, provided that you satisfied all of the requirements of the diversion program.
- Your conviction was pardoned.

Juvenile Convictions: You are not required to disclose juvenile records.

Misdemeanor Convictions: You are not required to disclose misdemeanor convictions except for those crimes involving dishonesty or theft (e.g., fraud, forgery, check kiting, shoplifting, larceny, embezzlement). If you are applying for a position that will require driving, you must also disclose any conviction for driving under the influence.

Time Limits: You are not required to disclose any felony conviction that is more than 10 years old. You are not required to disclose any misdemeanor conviction that is more than five years old unless you have been convicted of another offense during the last five years. If you have been convicted of another offense within the last five years, you must disclose all convictions that occurred within the last 10 years other than those excluded in the above instructions. For purposes of this instruction, if you were incarcerated as a result of your conviction, use the last date of incarceration rather than the date of conviction in calculating the five year or 10 year period.

Have you ever been convicted of a felony? ☐ Yes ☐ No

Have you ever been convicted of a misdemeanor? ☐ Yes ☐ No

If you answered “Yes,” explain in detail below, giving the dates and nature of each offense, the name and location of each court, and the disposition of each case.

Are you currently on probation, deferred adjudication or parole? ☐ Yes ☐ No

If so, with whom? _____

Employment History

Please include employment for the past ten (10) years, and any other relevant experience. Begin with your current or most recent job. You may attach a resume, but must still complete this section. Do not use the comment "See Resume."

Job Title: _____	Supervisor's Name: _____	Starting Salary:
Employer: _____	Title: _____	Final Salary:
Address: _____	Phone Number: _____	Average Number of Hours Worked Each Week:
City & State/Zip: _____	May we contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone Number: _____	Date Started: _____ Date Left: _____	
Summary of Job Duties and Responsibilities: _____ _____ _____ _____		
Specific Reason for Leaving or Wanting to Leave: _____		

Job Title: _____	Supervisor's Name: _____	Starting Salary:
Employer: _____	Title: _____	Final Salary:
Address: _____	Phone Number: _____	Average Number of Hours Worked Each Week:
City & State/Zip: _____	May we contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone Number: _____	Date Started: _____ Date Left: _____	
Summary of Job Duties and Responsibilities: _____ _____ _____ _____		
Specific Reason for Leaving or Wanting to Leave: _____		

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Employer: _____	Title: _____	Final Salary:
Address: _____	Phone Number: _____	Average Number of Hours Worked Each Week:
City & State/Zip: _____	May we contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone Number: _____	Date Started: _____ Date Left: _____	
Summary of Job Duties and Responsibilities: _____ _____ _____ _____		
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City & State/Zip: _____	May we contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
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Employer: _____	Title: _____	Final Salary:
Address: _____	Phone Number: _____	Average Number of Hours Worked Each Week:
City & State/Zip: _____	May we contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone Number: _____	Date Started: _____ Date Left: _____	
Summary of Job Duties and Responsibilities: _____ _____ _____ _____		
Specific Reason for Leaving or Wanting to Leave: _____		

Please attach additional sheets as necessary for employment history.

Special Skills / Qualifications

List all special skills you possess and / or machines or office equipment you can use, such as calculators, computer equipment, types of software/hardware, road construction equipment, etc. :

Other course work applicable to this type of work:

References

Below, Give the names of three persons you are not related to, whom you have known at least one year.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

Service Record

Branch of Service:	Dates of Service (from /to):
Rank:	Duties:

PRE-EMPLOYEMENT STATEMENT / AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand and agree that any false information, misrepresentation, or concealment of fact is sufficient grounds for either my immediate discharge without recourse, or refusal of employment by the City of Beverly Hills.

I authorize the City of Beverly Hills to make any inquiries they desire regarding my education, employment, ability, habits and personal character for the purpose of determining my fitness for employment. I also authorize previous employers, or any other persons to whom the City may refer, to give any and all information regarding my employment or scholastic record together with any information, personal or otherwise, and I hereby release such persons and any companies which they represent from all liability or any damages whatsoever in connection with their compliance. I understand that misrepresentation or omission of any information called for in this application which would affect my application unfavorably, or receipt of unsatisfactory references may result in termination of my employment without liability to me for salary except as may have been earned at the time of my termination. I also authorize the City of Beverly Hills to verify and investigate the status of my driver's license and to conduct any background check it deems necessary.

I also understand that any employment is subject to a satisfactory check of references, and that once a contingent offer of employment is made, I must satisfactorily pass a pre-placement physical, which will include a drug test. If employed I understand that my employment with the City of Beverly Hills will be "at will", meaning that either the City or myself may terminate the employment relationship at any time, for any reason or no reason at all with or without notice of any kind.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative."

Date of Signature

Signature

Printed Name

DO NOT WRITE ON THIS PAGE FOR INTERVIEWER'S USE ONLY

Interviewed by:	Date:
Comments:	

Interviewed by:	Date:
Comments:	

Interviewed by:	Date:
Comments:	

Employer / References Check/ Comment:	Date:
Employer / References Check/ Comment:	Date:
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Employer / References Check/ Comment:	Date:
Employer / References Check/ Comment:	Date:

Hired (Date) for Dept.		For Position:
Salary Wages		Will Report:
Approval 1	Department Head	Date
Approval 2	Mayor	Date
Approval 3	City Council	Date