



Graduate School						
Technical or Professional						
Others Trade/Military						

is needed, attach additional sheets. Include any job-related military assignments and volunteer activities. Only those jobs listed will be considered in determining your eligibility. This section must be fully completed.

From		To		Name of Company and Address	Salary	
Mo.	Yr.	Mo.	Yr.		Start	Final
				-		-
						-
						-

Job Title \_\_\_\_\_

Supervisor's Name/Title \_\_\_\_\_ May we contact? Yes  No

Description of Duties and Accomplishments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

From		To		Name of Company and Address	Salary	
Mo.	Yr.	Mo.	Yr.		Start	Final
				-		-
						-
						-

Job Title \_\_\_\_\_

Supervisor's Name/Title \_\_\_\_\_ May we contact? Yes  No

Description of Duties and Accomplishments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**EMPLOYMENT RECORD CONTINUED:**

From		To		Name of Company and Address	Salary	
Mo.	Yr.	Mo.	Yr.		Start	Final
				-		-
						-
						-

Job Title \_\_\_\_\_

Supervisor's Name/Title \_\_\_\_\_ May we contact? Yes  No

Description of Duties and Accomplishments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

From		To		Name of Company and Address	Salary	
Mo.	Yr.	Mo.	Yr.		Start	Final
				-		-
						-
						-
						-

Job Title \_\_\_\_\_

Supervisor's Name/Title \_\_\_\_\_ May we contact? Yes  No

Description of Duties and Accomplishments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**16. OTHER COMMENTS ABOUT YOUR CAREER OBJECTIVES OR ABILITIES WHICH MAY PERTAIN TO THE POSITION.**

\_\_\_\_\_  
 \_\_\_\_\_

**APPLICANT CERTIFICATION:** All answers and statements in this application are true and complete to the best of my knowledge and belief. I understand that untruthful or misleading answers are cause for rejection of this application, removal of name from an eligible list, or dismissal from district employment. I authorize investigation of all statements in this application for employment as may be necessary in arriving at an employment decision. I understand that I may be requested to submit proof of qualifications at a later date. If upon checking these you determine that I do not meet specific requirements, I understand that I will be disqualified.

In order that the District may verify the accuracy of the information contained in my application, I hereby authorize any former employer, its employees or representatives, or any person listed as a reference to provide any and all information they deem appropriate regarding my employment and job performance, references, education or training, and criminal history, including driving record to the RCSD, and any of its employees, representatives, and agents. I understand that the District has a right to obtain criminal history information. This information may be provided either verbally or in writing. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against any former employer, its employees and representatives, or any person listed as a reference, and release any former employer, its employees and representative, former educational institution, or any person listed as a reference from any an all liability, claims, or damages that may directly or indirectly result form the use, disclosure, or release of such information by any person or party, whether such information is favorable or unfavorable to me. I am aware that fingerprinting may be required after an offer of employment. In addition, I am aware that after an offer of employment has been extended, I may be required to submit to a medical examination that includes a drug and/or alcohol analysis. I also understand that failure to submit to or satisfactorily complete this examination may result in any offer of employment being withdrawn.

**APPLICANTS SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**ELECTION TO RECEIVE/NOT RECEIVE PUBLIC RECORDS**

**[California Civil Code section 1786.53]**

I am aware that the Rossmoor Community Services District may obtain public records regarding me for employment purposes, including but not limited to evaluation for employment, assignment, and/or promotion as well as conducting investigations into possible misconduct.

I acknowledge that the term public records as used herein are limited to records of: arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment.

**Check one box only:**

- I hereby elect to receive any public records which may be obtained by the Rossmoor Community Services District for employment purposes under Civil Code section 1786.53.
- I hereby elect not to receive any public records which may be obtained by the Rossmoor Community Services District for employment purposes under Civil Code section 1786.53.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

**This form must be completed as part of the application packet.**