

APPLICANT NAME: _____

POSITION APPLIED FOR: _____



APPLICATION FOR EMPLOYMENT

CHIEF OF POLICE
KELLY GORDON
Police Department
215 East Figueroa Street
Santa Barbara, CA 93101
Telephone: (805) 897-2300



HUMAN RESOURCES
EXECUTIVE DIRECTOR
Police Activities League
P.O. Box 91121
Santa Barbara, CA 93190
Telephone: (805) 962-5560

PERSONAL HISTORY STATEMENT OF NON-SWORN PERSONNEL AND RELEASE

The information you provide in this Personal History Statement will be used to assist in determining your suitability for the position. Please fill out the questionnaire completely and accurately, keeping in mind that all statements are subject to verification and deliberate inaccuracies, or incomplete statements may bar or remove you from employment.

Please type or print in ink your response to this questionnaire.

Often it is timely to employ an individual prior to completion of the medical examination or other inquiries. In instances such as this your continued employment will be based on the successful completion of those examinations. You will be notified when the background investigation is completed.

Your signature below indicates that you have read and understand the provisions of this questionnaire and that you are willing to accept conditional employment pending the results of all examinations.

I, the undersigned, being of lawful age, knowing and voluntarily state and agree as follows:

In consideration of the opportunity to work at the Santa Barbara Police Activities League, I do hereby for myself, and my heirs, executors, administrators, successors, and assigns, release, waive and forever discharge the Santa Barbara Police Activities League, City of Santa Barbara, and its officers, employees, and agents, from any and all claims, actions, damages, costs, judgments, or liabilities whatsoever, which may hereafter accrue to me on account of or in any way growing out of any and all known and unknown, foreseen and unforeseen, bodily and personal injuries and property damage and the consequences thereof resulting from my participating in the Santa Barbara Police Activities League.

I understand that in signing this agreement, I am releasing the Santa Barbara Police Activities League from any and all claims that I may have for personal injuries or property damage that I may suffer as a result of participating in the above-described event, even if such injuries or damage were caused by the negligence or willful misconduct of the Santa Barbara Police Activities League, the City of Santa Barbara or its agents, officers or employees.

I further understand and agree that in signing this document, all my rights under Section 1542 of the Civil Code of California are also expressly waived. That section reads as follows:

A general release does not extend to claims the creditor does not know or suspect to exist in his favor at the time of executing the release, which, if known by him, must have materially affected his settlement with the debtor.

I acknowledge that no representation of facts or opinion has been made by the Santa Barbara Police Activities League, City of Santa Barbara, or any of its officers, employees, or agents, to induce this release on my part and that I have signed this release freely and voluntarily, after having it read completely, and with the full knowledge of the rights or privileges that I may be waiving or releasing.

In Witness thereof, I have executed this release on _____, 20____

Supervisor Signature

Date

Applicant Signature

Date

POLICE ACTIVITIES LEAGUE

A NON PROFIT ORGANIZATION #77-0523426

POST OFFICE BOX 91121
 SANTA BARBARA, CA 93190
 OFFICE: (805) 962-5560



APPLICATION FOR EMPLOYMENT

(Please print in blue or black Ink or Type)

1. Social Security Number: _____ Position Applied for: _____
In accordance with the Federal Privacy Act of 1974, disclosure is voluntary. The SSN will be used for identification purposes to ensure that proper records are obtained.

2. Name: _____
 Last First Middle

3. Other names alias use, or known by: _____

4. Address: _____
 Number & Street City State Zip

5. Cell Phone: _____ Email: _____

6. Date of Birth: _____ Place of Birth _____
 Month Day Year City State Country

7. In case of emergency, notify: _____
 Name Address Phone Number

8. Do you have a legal right to be permanently employed in the U.S.? Yes No
At the time of appointment, all new employees will be required to furnish documentation verifying their identity and authorization to work in the United States.

9. Do you possess a valid California Driver's License? Yes No License Number: _____

10. Have you ever been convicted of a felony or misdemeanor? Yes No
 If YES, ON A SEPARATE SHEET OF PAPER, give the following information for each offense: (1) date, (2) charge, (3) place, (4) court and (5) action taken. You may omit any offense rendered final in a juvenile court, under a youth offender law, or listed in labor code section 432.8. A conviction will not necessarily disqualify you from employment. FALSE STATEMENTS OR OMISSIONS OF CONVICTION(S) SHALL BE JUST CAUSE FOR DISQUALIFICATION FROM EMPLOYMENT.

11. For identification purposes, please provide the following:
 Height Weight Hair Color Eye Color

Scars, tattoos, or distinguishing marks:

12. Have you ever been arrested? Yes No

13. If the answer is yes, please list approximate date(s), number of times, and under what circumstances:

14. **EDUCATION/TRAINING** Have you graduated from High School or do you possess a GED? Yes No

Name and Location of College or University	Subject or Major	Units Completed		Title of Degree Awarded
		Semester	Quarter	

List any training, certificates, licenses, computer, or language skills which directly relate to position applied for:

15. Please list the names of **professional references** (other than family members or friends) who can be contacted to provide information regarding your work skills.

Name of Reference: _____

Relationship: _____

Address: _____

Phone Number: _____

Name of Reference: _____

Relationship: _____

Address: _____

Phone Number: _____

16. Have you ever been involved in any civil litigation? Yes No

17. Have you ever been fired or asked to resign from any place of employment? Yes No

If yes, please give details include when, where, circumstances:

18. **EMPLOYMENT HISTORY.** List your employment, BEGINNING WITH YOUR CURRENT OR MOST RECENT EMPLOYER AND WORK BACKWARDS. List each change of title or promotion separately. Account for periods of unemployment and indicate any other experience which you feel is relevant to the position for which you are applying (e.g., volunteer experience, military experience, etc.) RESUMES MAY BE SUBMITTED IN ADDITION TO, **BUT NOT IN PLACE OF,** COMPLETION OF ANY PORTION OF THE APPLICATION. IT IS CRITICAL THAT YOU PROVIDE COMPLETE INFORMATION. Attach an additional sheet if extra space is needed. Employment verification may be made regarding your past experience.

19. May we contact your current employer? Yes No Past Employers? Yes No

If no, please explain:

Employer: _____ Phone: _____

Address: _____ Job Title: _____

Date Started / / Date Left / / Supervisor's Name/Job Title: _____
Month Day Year Month Day Year

Hours per Week: _____ Responsibilities: _____

Reason for leaving: _____ Rate of Pay: _____

Employer: _____ Phone: _____

Address: _____ Job Title: _____

Date Started / / Date Left / / Supervisor's Name/Job Title: _____
Month Day Year Month Day Year

Hours per Week: _____ Responsibilities: _____

Reason for leaving: _____ Rate of Pay: _____

I certify that this application and any supplemental information is true to the best of my knowledge and belief, and I understand that false statements, information, or willful misrepresentation shall be just cause for rejection of this application or subsequent discharge.

Signed _____ Date _____