

Mission Oaks Recreation and Park District

3344 Mission Ave.

Carmichael, CA 95608

Phone: (916) 488-2810

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

TYPE or PRINT in INK Please complete the application by typing or clearly printing in dark ink. Submit a separate application (photocopy acceptable) for each recruitment announcement. If your application materials do not clearly show you meet the qualifications of the job for which you are applying, your application will not be accepted.

POSITION APPLIED FOR (Listed on the recruitment announcement) **AND LOCATION:** **DATE OF APPLICATION:**

DRIVER'S LICENSE NUMBER: **STATE OF ISSUE:**

N A M E A N D A D D R E S S

NAME (LAST, FIRST, M.I.):			HOME TELEPHONE (include area code):
MAILING ADDRESS:			WORK TELEPHONE (Provide only one including area code):
CITY	STATE	ZIP CODE:	OTHER (include area code):
EMAIL ADDRESS:			<input type="checkbox"/> CELL PHONE <input type="checkbox"/> MESSAGE

WORK SCHEDULE AVAILABILITY

Check Only One: <input type="checkbox"/> NON-SEASONAL (NS) <input type="checkbox"/> SEASONAL (S) <input type="checkbox"/> EITHER (B)	Check Only One: <input type="checkbox"/> FULL TIME (F) <input type="checkbox"/> PART TIME (P) <input type="checkbox"/> TEMPORARY(I) <input type="checkbox"/> ANY (B)	Date You Can Report For Work:
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Are you willing to work for Mission Oaks Recreation & Park District in a temporary position?
(Check one) YES NO

EDUCATION / TRAINING HISTORY

List colleges, military, trade, business or other schools attended.

Do you have a high school diploma or a GED certificate? (Check one) YES NO

Name and Location Of School, College, or University	Course of Study (List Major)	Credits Earned Check One & Indicate Hours	Did You Graduate? (Yes / No)	Degree or Certificate Received (AA, BA, BS, MA, PhD)
A		<input type="checkbox"/> Quarter <input type="checkbox"/> Semester <input type="checkbox"/> Clock		
B		<input type="checkbox"/> Quarter <input type="checkbox"/> Semester <input type="checkbox"/> Clock		
C		<input type="checkbox"/> Quarter <input type="checkbox"/> Semester <input type="checkbox"/> Clock		

SPECIALIZED SKILLS AND KNOWLEDGE

List skills or knowledge that show your ability to perform the job for which you are applying (such as typing speed, computer skills, languages or software programs, foreign languages, etc.). Attach additional pages as needed.

WORK HISTORY

JOB NUMBER 1 (current or most recent position)

NAME OF EMPLOYER		EMPLOYER'S ADDRESS and PHONE NUMBER	
KIND OF BUSINESS		SUPERVISOR'S NAME and PHONE NUMBER	
YOUR JOB TITLE		SUPERVISION / LEADWORK CHECK AREAS YOU WERE RESPONSIBLE FOR: <input type="checkbox"/> Assigning and Reviewing work <input type="checkbox"/> Handling Disciplinary problems <input type="checkbox"/> Rating Work Performance <input type="checkbox"/> Responding to Grievances <input type="checkbox"/> Hiring or Recommending Hiring <input type="checkbox"/> Not Responsible for Any of Above If you checked any of these boxes, list the number of employees and their job titles:	
FROM (MONTH - YEAR)	TO (MONTH - YEAR)	<input type="checkbox"/> Assigning and Reviewing Work <input type="checkbox"/> Handling Disciplinary Problems <input type="checkbox"/> Rating Work Performance <input type="checkbox"/> Responding to Grievances <input type="checkbox"/> Hiring or Recommending Hiring <input type="checkbox"/> Not Responsible for Any of Above	
TOTAL TIME IN CURRENT OR LAST POSITION:	HOURS WORKED PER WEEK (Average)	If you checked any of these boxes, list the number of employees and their job titles.	
DUTIES (List all duties you performed. No credit will be given if this section is not completed.):			
Reason for leaving this position:			

JOB NUMBER 2

NAME OF EMPLOYER		EMPLOYER'S ADDRESS and PHONE NUMBER	
KIND OF BUSINESS		SUPERVISOR'S NAME and PHONE NUMBER	
YOUR JOB TITLE		SUPERVISION / LEADWORK CHECK AREAS YOU WERE RESPONSIBLE FOR: <input type="checkbox"/> Assigning and Reviewing work <input type="checkbox"/> Handling Disciplinary problems <input type="checkbox"/> Rating Work Performance <input type="checkbox"/> Responding to Grievances <input type="checkbox"/> Hiring or Recommending Hiring <input type="checkbox"/> Not Responsible for Any of Above If you checked any of these boxes, list the number of employees and their job titles:	
FROM (MONTH - YEAR)	TO (MONTH - YEAR)	<input type="checkbox"/> Assigning and Reviewing Work <input type="checkbox"/> Handling Disciplinary Problems <input type="checkbox"/> Rating Work Performance <input type="checkbox"/> Responding to Grievances <input type="checkbox"/> Hiring or Recommending Hiring <input type="checkbox"/> Not Responsible for Any of Above	
TOTAL TIME IN CURRENT OR LAST POSITION:	HOURS WORKED PER WEEK (Average)	If you checked any of these boxes, list the number of employees and their job titles.	
DUTIES (List all duties you performed. No credit will be given if this section is not completed.):			
Reason for leaving this position:			

JOB NUMBER 3

NAME OF EMPLOYER		EMPLOYER'S ADDRESS and PHONE NUMBER	
KIND OF BUSINESS		SUPERVISOR'S NAME and PHONE NUMBER	
YOUR JOB TITLE		SUPERVISION / LEADWORK CHECK AREAS YOU WERE RESPONSIBLE FOR: <input type="checkbox"/> Assigning and Reviewing work <input type="checkbox"/> Handling Disciplinary problems <input type="checkbox"/> Rating Work Performance <input type="checkbox"/> Responding to Grievances <input type="checkbox"/> Hiring or Recommending Hiring <input type="checkbox"/> Not Responsible for Any of Above If you checked any of these boxes, list the number of employees and their job titles:	
FROM (MONTH - YEAR)	TO (MONTH - YEAR)	<input type="checkbox"/> Assigning and Reviewing Work <input type="checkbox"/> Handling Disciplinary Problems <input type="checkbox"/> Rating Work Performance <input type="checkbox"/> Responding to Grievances <input type="checkbox"/> Hiring or Recommending Hiring <input type="checkbox"/> Not Responsible for Any of Above	
TOTAL TIME IN CURRENT OR LAST POSITION:	HOURS WORKED PER WEEK (Average)	If you checked any of these boxes, list the number of employees and their job titles.	
DUTIES (List all duties you performed. No credit will be given if this section is not completed.):			
Reason for leaving this position:			

REFERENCES			
Do not include family members			
Name	Phone Number	Best Time to Call	Occupation

CERTIFICATION AND SIGNATURE

I understand that any verbal or written statement that is false, fraudulent or misleading that is contained in this application or attached materials, or made in the course of any related employment process, whether made by me or by others at my request, will result in rejection of my application, denial of employment, or dismissal from service if discovered after employment, and under some circumstances, may result in prosecution for a crime.

- ◆ I certify that all statements contained herein are true and complete whether made by me or others at my request.
- ◆ I understand that if hired, I must prove that I am legally authorized to work in the United States.
- ◆ I authorize the State of California to check employment references and verify education information provided on this employment application and as disclosed in the interview process.
- ◆ I authorize the State of California to check my driving record if the position for which I am applying requires driving.
- ◆ You may be asked to submit to a pre-employment drug test, a credit history check and/or criminal history background check as a condition of employment.
- ◆ **I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.**

By electronically submitting my application materials, I agree to the conditions stated in this “Certification and Signature” section, and this section is enforceable as if I had signed below.

SIGNATURE (Must be signed **IN INK** and submitted in person):

DATE:

KEEP A COPY OF YOUR APPLICATION FOR INTERVIEWS. COPIES WILL NOT BE PROVIDED.

**THANK YOU FOR YOUR INTEREST IN EMPLOYMENT WITH
Mission Oaks Recreation and Park District**

OFFICE USE ONLY

Interviewer (Print Name):

Date of Interview

HIRED

NOT HIRED _____

QUESTIONNAIRE

EMPLOYEE, CONTRACTOR OR VOLUNTEER BEING CONSIDERED FOR A POSITION HAVING SUPERVISORY AUTHORITY OVER MINORS

Section 5164 of the Public Resources Code of the State of California prohibits Mission Oaks Recreation and Park District from hiring a person for employment at, or hiring a contractor or volunteer to perform services at, any of its parks, playgrounds or recreational centers used for recreational purposes in a position having supervisory or disciplinary authority over any minor, if the person has been convicted of certain crimes under the California Penal Code. Section 5164 also authorizes Mission Oaks Recreation and Park District to screen any such prospective employee or volunteer for his or her criminal background. In light of your interest in being hired by Mission Oaks Recreation and Park District for employment at or being hired as a volunteer to perform services at, any of its parks, playgrounds or recreational centers used for recreational purposes, in a position of having supervisory or disciplinary authority over any minor, and in order to give effect to Section 5164 of the Public Resources Code of the State of California, please answer the following supplemental questions:

- 1. Have you ever been convicted of a violation or attempted violation of any of the statutes specified in Public Resources Code Section 5164 (copy attached), including conviction for violation or attempted violation of an offense committed outside the State of California, if the offense would have been a crime as defined in the statutes referred to if committed in California? This question does not refer to a misdemeanor conviction as defined in Part B of Attachment A (copy attached), unless you have three or more misdemeanors convictions, a felony conviction, or were incarcerated for any of those crimes listed within the preceding ten (10) year period? Yes_____ No_____**

If your answer is yes, please describe the crime(s) for which you were convicted, the date upon which you were convicted and the jurisdiction in which you were convicted:

- 2. Without in any way limiting the foregoing, have you ever been convicted of any crime involving an assault with intent to commit a felony, any crime against a person involving sexual assault, any crime against public decency and good morals, disorderly conduct, annoying or molesting a child under age 18, kidnapping, robbery or carjacking? Yes_____ No_____**

If your answer is yes, please describe the crime(s) for which you were convicted, the date upon which you were convicted and the jurisdiction in which you were convicted?

- 3. Are you currently released on bail or on your own recognizance for any crime? Yes_____ No_____**

If your answer is yes, please describe the crime(s) with which you have been charged, the date upon which you were charged and the jurisdiction in which you were charged.

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4. Are you willing to be fingerprinted in order that Mission Oaks Recreation and Park District may screen you for criminal background? Yes _____ No _____

DECLARATION

I, (print name) _____, in seeking to be hired by Mission Oaks Recreation and Park District for employment at, or hired by Mission Oaks Recreation and Park District to perform services at, any park, playground or recreational center used by Mission Oaks Recreation and Park District for recreational purposes, in a position having supervisory or disciplinary authority over any minor, hereby declare under penalty of perjury that the foregoing is true and correct and that this declaration is executed at:

(City) _____, California on (date) _____, (year) _____

I acknowledge and agree that should any of my answers to the foregoing questions be subsequently determined to be false and not true, Mission Oaks Recreation and Park District can immediately terminate my employment by it or cease allowing me to perform voluntary services, without notice.

I hereby agree to indemnify and hold harmless Mission Oaks Recreation and Park District, its directors, agents and employees, from any and all claims, causes of action, suits, actions, damages, losses or liability arising out of termination of my employment and/or termination of my volunteer services rendered to Mission Oaks Recreation and Park District which may occur should any of my answers to the foregoing questions be subsequently determined to be false and not true and/or untrue.

Applicant Signature

Date

Supervisor Signature

Date