

APPLICATION FOR EMPLOYMENT

Monterey Peninsula Regional Park District

P.O. Box 223340, Carmel, CA 93922 4860 Carmel Valley Road, Carmel, CA 93923 (831) 372-3196 l jobs@mprpd.org www.mprpd.org

MONTEREY PENINSULA REGIONAL PARK DISTRICT (MPRPD) IS AN EQUAL OPPORTUNITY EMPLOYER

State and federal laws prohibit discrimination in employment because of race/color, ancestry/national origin, religion, creed, age, disability, sex, gender, sexual orientation, gender identity, gender expression, medical condition, genetic information, marital status, military and veteran status, or any other characteristic protected by federal, state, or local law.

Please answer all questions completely and accurately. False or misleading statements during the interview and/or on this form are grounds for terminating the application process, or if discovered after employment, terminating the employment relationship.

NAME:			POSITION	FOR WHICH YOU ARE A	PPLYING:		
(Last)	(First)	(Middle)					
ADDRESS:			HOME PHO	ONE:			
			CELL PHO	NE:			
(City) (State) (Zip) SOCIAL SECURITY NUMBER:			E-MAIL AD	E-MAIL ADDRESS:PREFERRED PRONOUNS:			
SOCIAL SECURITY	NUWBER:		PREFERRI	ED PRONOUNS:			
EDUCATION: (Ple	ase include voc	ational, busin	ess, trade, or corresponder	nce schools under Other.)			
·			Undergraduate	Graduate/			
	High So	chool	College/University	Professional	Othe	er	
School Name & Location							
Years Completed							
Major/Minor							
Degree/Certificates							
					Yes	No	
Are you under the age of 18? If Yes, can you provide proof of your eligibility to work?							
If offered employment	1	ide proof of	vova logol vight to work in	the U.C.2	<u> </u>		
Proof of employment ell		•	your legal right to work in aployment.	i the U.S.?			
					T	1	
Have you previously applied for employment with MPRPD? If Yes, when? Position for which applied:					_		
Do you have relatives	employed by	MPRPD2 If V	'es who?				
	cinpioyed by		<u> </u>				
Have you ever been a If Yes, are you a Retired		e California F	Public Employees' Retiren	nent System (CalPERS)?			
					•		
How did you hear abo	out this job? $_$						

	ed, terminated, or had an employment contrac cciplinary reasons? If Yes, provide details:	t terminated from any Yes No		
LICENSES AND CERTIFICATES: List any licenses, certificates, profession or applicable to the position for which y	onal or vocational competence you possess to praction are applying:	ctice a trade or profession if it is a requirement		
Description	License/Certificate Number	Expiration		
have and maintain a valid California d	ng is <u>safety sensitive</u> and requires driving an MPR driver license. Please complete the following AN f required, Applications submitted without this info	ND provide a copy of your DMV Driver License		
Driver License Number:	Class:	Expiration Date:		
volunteer experience. Use a separate b	yment first, list all other jobs in order. Please incl lock for each position, including those within the s or additional information but will <u>not</u> be accepted i	same organization. Attach additional sheets if		
Employment Dates (From/To):	Name of Employer:	Name of Employer:		
Position:	Address:	Address:		
Immediate Supervisor & Title:	Supervisor Phone Number & E-mail Addre	Supervisor Phone Number & E-mail Address:		
Description of Duties:				
Reason for Leaving:				

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Employment Dates (From/To):	Name of Employer:
Position:	Address:
Immediate Supervisor & Title:	Supervisor Phone Number & E-mail Address:
Description of Duties:	
Reason for Leaving:	
Employment Dates (From/To):	Name of Employer:
Position:	Address:
Immediate Supervisor & Title:	Supervisor Phone Number & E-mail Address:
Description of Duties:	
Reason for Leaving:	
Employment Dates (From/To):	Name of Employer:
Employment Dates (From/To): Position:	Name of Employer: Address:
Position:	Address:
Position: Immediate Supervisor & Title:	Address:
Position: Immediate Supervisor & Title:	Address:
Position: Immediate Supervisor & Title: Description of Duties:	Address:
Position: Immediate Supervisor & Title: Description of Duties: Reason for Leaving:	Address: Supervisor Phone Number & E-mail Address:
Position: Immediate Supervisor & Title: Description of Duties: Reason for Leaving: Employment Dates (From/To):	Address: Supervisor Phone Number & E-mail Address: Name of Employer:
Position: Immediate Supervisor & Title: Description of Duties: Reason for Leaving: Employment Dates (From/To): Position:	Address: Supervisor Phone Number & E-mail Address: Name of Employer: Address:
Position: Immediate Supervisor & Title: Description of Duties: Reason for Leaving: Employment Dates (From/To): Position: Immediate Supervisor & Title:	Address: Supervisor Phone Number & E-mail Address: Name of Employer: Address:
Position: Immediate Supervisor & Title: Description of Duties: Reason for Leaving: Employment Dates (From/To): Position: Immediate Supervisor & Title:	Address: Supervisor Phone Number & E-mail Address: Name of Employer: Address:

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APPLICANT'S STATEMENT

I certify that the statements given by me in this application are true, complete, and correct to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary to arrive at an employment decision. I understand and acknowledge that the policy of the Monterey Peninsula Regional Park District is such that the existence of a criminal conviction will not necessarily disqualify my application for employment.

I understand that if offered employment, the offer may be contingent on passing a pre-employment drug screen and a pre-employment physical and I voluntarily agree to submit to these procedures. I also understand that I will be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

I understand that unless expressly noted otherwise on the job announcement, the position for which I am applying requires driving during the course of employment and I will be required to possess and maintain a valid California driver license.

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission, false, or misleading information on this application, or any document used to secure employment shall be grounds for rejection of this application or immediate discharge if I am employed, regardless of the time elapsed before discovery. I understand that I am required to abide by all personnel policies, rules, and procedures of the Monterey Peninsula Regional Park District.

I hereby authorize Monterey Peninsula Regional Park District to thoroughly investigate my employment history, education, and other matters related to my suitability for employment, without giving me prior notice of such disclosure. In addition, I hereby release Monterey Peninsula Regional Park District from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that nothing contained in the application, or conveyed during any interview that may be granted, is intended to create an employment contract between Monterey Peninsula Regional Park District and me.

Signature of Applicant:	Dat	e:
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