

## **Town of Truckee Job Application**

Submit by email function is temporarily unavailable. You may email your application to hr@townoftruckee.com

10183 Truckee Airport Road Truckee, CA 96161 Human Resources Dept. 530-582-2925 530-550-2343 fax

Date:					
Position applying for:					
Available for work:     Full Time	□Part Time	$\Box$ Temporary			
Name:					
Please print) Last		First			Middle Initia
Mailing Address:		Contact Nu	mber:		
City: State	:: Zip: _	Email:			
Have you ever been known by any other notes f YES, state under what name(s):				⊒Yes □N	0
Military Service: From: To:				 □Yes □N	0
Can you perform the essential duties of the f NO, give details:	e job as listed ir	n the job description?		□Yes □N	0
Are you a Town of Truckee employee?  Check YES only if you are PRESENTLY emplo  Are you related by blood or marriage to an	yed by the Tow	employed by the Tov	wn of Truckee		es 🗆 No
f yes, give name, relationship and departme	ent in which em	nploved:			
					—
Did you graduate from high school? $\Box$ Ye					es 🗆 No
Did you graduate from high school? ☐Ye					es 🗆 No
Did you graduate from high school? ☐Ye		o, did you have a G.E		e? □Y€	es □No
Did you graduate from high school? ☐Ye					Degrees Received and Year
Did you graduate from high school?   College and school after high school:  Name of School	es □No <b>If N</b>	years Attended	.D. certificate	? □Ye Total Units or	Degrees Received
Did you graduate from high school?   College and school after high school:  Name of School	es □No <b>If N</b>	years Attended	.D. certificate	? □Ye Total Units or	Degrees Received
College and school after high school:  Name of School  (Indicate if Graduate School or College)  Are you prevented from becoming lawfully Proof of citizenship or immigration status of a license or certificate is a requirement of	Major  y employed in the will be required of the position for	Years Attended From-To  his country because o upon employment.) or which you are appl	Did you graduate?  f Visa or Imm  Yes	Total Units or Hours  nigration St.	Degrees Received and Year atus?
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Did you graduate from high school?   College and school after high school:  Name of School	Major  y employed in the will be required of the position for the position	Years Attended From-To  his country because of upon employment.) or which you are appl  Expiration Date:  SS A?   Yes  No	Did you graduate?  f Visa or Imm  Yes  lying, and you	Total Units or Hours  igration Standard possess the	Degrees Received and Year  atus?  The license or certification  Class C?   Yes   N
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Previous Employment: List present job first. Use a separate block for each job title (even those with the same employer). Show all employment for the past 10 years (attach a separate sheet if necessary). Account for periods of unemployment in excess of 90 days. Your acceptance depends on the completeness and applicability of the information listed. Show exact job title and specific duties which you performed. Title: \_\_\_\_\_ Dates of Employment Employer's Name & Address: From: \_\_\_\_\_ To: Reason for Leaving: \_\_\_\_\_ (Month / Year) Responsibilities/Duties: Dates of Employment Title: \_\_\_\_\_ Employer's Name & Address: From: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_ (Month / Year) Responsibilities/Duties: Dates of Employment Employer's Name & Address: From: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_ (Month / Year) Responsibilities/Duties: Employer's Name & Address: Dates of Employment From: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_ (Month / Year) Responsibilities/Duties: \_\_\_\_\_ Employer's Name & Address: Dates of Employment From: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_ (Month / Year) Responsibilities/Duties: **REFERENCES:** Must be persons over 21 years of age who have known you for more than one year and are not related to you by blood or marriage. Address **Phone Number** Name Certificate of Applicant (Read this statement carefully before signing): I hereby certify that all statements made on or in connection with this application, including those regarding my training and experience, are true and complete to the best of my knowledge. I understand that any misstatements or omissions of material fact herein may be cause for denial of employment or termination. NOTE: The Town of Truckee's policy is to make reasonable accommodations to the needs of job applicants and employees who are disabled individuals. Please notify the Personnel Department if special testing arrangements are required to accommodate your disabilities. Town employment requires the successful completion of a physical examination, a drug screen, and a background check. By submitting this application you are consenting to take or allow to be taken any action required to complete those steps, including providing a copy of your DMV record to the Town. For further information, please contact the Human Resources Department. If you received this form electronically and are returning via e-mail, you will be required to sign an original version of the application prior to being interviewed for the position. Name (please print):

Signature: