

Application for Employment

Lake County Fair/49th DAA
401 Martin Street
Lakeport, CA 95453

Position you are applying for _____

Personal Information (Please type or print clearly)

Last Name First Name Middle Initial

Street Address Telephone Number

City State Zip Code Message Telephone

Are you able to perform the essential functions of the job for which you are applying? Yes No

Have you ever worked for the State of California? _____

If yes, list agency and dates _____

Were you ever a member of PERS? _____ If yes, did you withdraw your contributions? _____

Do you have any relatives working at the fairgrounds? _____ If yes, list names: _____

Relation: _____ Department: _____

When can you start work? _____ Full-time _____ Part-time _____ Hours desired _____

Have you ever been discharged from a position? _____ If yes, please explain _____

Have you ever been convicted of an offense other than a minor traffic violation since your 18th birthday? _____

If yes, please explain _____

(You may omit any offense settled in juvenile court, etc. A conviction will not necessarily disqualify applicant from the position applied for.)

Education

Name & Location of School Specialty or Major Degree Earned

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Skills-List any special skills/training relevant to the position for which you are applying

Employment Record List most recent first. Please complete in its entirety & attach resume if desired

1

Company Name _____ Name of Supervisor _____

Address _____ Telephone Number _____

Dates of Employment (State month & year) Salary _____ Reason for leaving _____

Job Title & Duties _____

2

Company Name _____ Name of Supervisor _____

Address _____ Telephone Number _____

Dates of Employment (State month & year) Salary _____ Reason for leaving _____

Job Title & Duties _____

3

Company Name _____ Name of Supervisor _____

Address _____ Telephone Number _____

Dates of Employment (State month & year) Salary _____ Reason for leaving _____

Job Title & Duties _____

We may contact the employers listed above unless you indicate those you do not want us to contact.

DO NOT CONTACT: Employer Number(s) _____ **Reason** _____

References List individuals familiar with your work-related qualifications.

Name	Address	Occupation	Phone #

I affirm that all answers are true and correct to the best of my knowledge and belief. I understand that any false statement or omission may be cause for rejection of my application or for my discharge of employment after appointment. I understand that this information is considered confidential. I also understand that if hired, I must provide documentation attesting to my identity and legal right to work in the United States as required by law.

Signature of Applicant _____ Date _____