

**APPLICATION FOR
EMPLOYMENT
(SHORT FORM)**

**CITY OF LOS ANGELES
PERSONNEL DEPARTMENT
AN EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER**



1. CITY JOB (EXAMINATION) TITLE			2. CLASS CODE NO.		
3. SOCIAL SECURITY NUMBER		4. SUPPLEMENTAL INFORMATION IF REQUESTED			
5. NAME: LAST		FIRST	MIDDLE		
6. PRESENT ADDRESS: NUMBER		STREET	APARTMENT OR P.O. BOX NUMBER	7. HOME PHONE – Area & Number ()	
CITY		STATE (Province)	ZIP CODE	8. WORK PHONE – Area & Number ()	
9. DRIVER'S LICENSE NUMBER	STATE	EXPIRATION	10. CAN YOU SUBMIT VERIFICATION OF THE LEGAL RIGHT TO WORK PERMANENTLY IN THE UNITED STATES AFTER A JOB OFFER IS MADE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
11. DO YOU NEED ANY ACCOMMODATION IN TAKING A CITY EXAMINATION BECAUSE OF A PHYSICAL, MENTAL, OR LEARNING DISABILITY? <input type="checkbox"/> YES <input type="checkbox"/> NO			11a. PLEASE BRIEFLY DESCRIBE THE REQUIRED ACCOMMODATION:		
12a. HAVE YOU PREVIOUSLY WORKED FOR THE CITY OF LOS ANGELES?			HAVE YOU EVER BEEN GRANTED AN ACCOMMODATION FOR A PREVIOUS CITY EXAMINATION? <input type="checkbox"/> YES <input type="checkbox"/> NO		
12b. HAVE YOU PASSED ANY EXAMINATION GIVEN BY THE CITY OF LOS ANGELES IN THE LAST TWO YEARS?			13. SIGNATURE (Original in ink; pencil or photocopy not accepted)		
12c. LIST NAMES USED IN THE PAST, INCLUDING NAMES USED IN OTHER RECORDS:					
<p>I certify that all statements on this application are true and complete to the best of my knowledge. I understand false or incomplete statements shall be sufficient cause for disqualification or dismissal. By signing, I authorize the City of Los Angeles to obtain employment information from any current/previous employers.</p>					

SOCIAL SECURITY NUMBER (Space 3) - Federal law (P.L. 93-579, Sect. 7) requires that you be informed, when asked for your Social Security Number, that this number must be provided and that it will be used for identification purposes in the City's examination, employment and payroll processes. Our authority for requesting and requiring this information is based upon certain provisions of the Internal Revenue Code, the Social Security Act as amended, and payroll and Candidate Application Processing System (CAPS) procedures approved and implemented prior to June, 1984

AFFIRMATIVE ACTION RESEARCH AND SPECIAL DATA. The City of Los Angeles is an Equal Employment Opportunity/Affirmative Action Employer. We request voluntary identification of your sex and ethnic/racial group so that we can monitor the effectiveness of our Equal Employment Opportunity program. Whether you complete spaces 14a and 14b will not affect your employment.

PLEASE CHECK THE MOST APPROPRIATE BOXES:

14a. SEX:

- Male
 Female

14b. ETHNIC GROUP/RACE:

- Black (1)
 Hispanic (2)
 Asian (3)
 Caucasian (4)
 American Indian (5)
 Filipino Origin (7)

15. HAVE YOU EVER BEEN DISCHARGED OR TERMINATED FOR ANY REASON EXCEPT FOR LACK OF WORK; OR HAVE YOU RECEIVED A GENERAL OR DISHONORABLE DISCHARGE FROM THE MILITARY SERVICE?

YES NO

(Cite all cases. Attach additional sheet.)

16. Have you ever been convicted of a felony or misdemeanor other than minor traffic violations? (Driving under the influence, reckless, or hit-run driving are not minor driving violations.) Include any convictions by military trial and any criminal charges for which you are awaiting trial. (FAILURE TO ADMIT WILL RESULT IN DISQUALIFICATION). You may be fingerprinted and your complete police record reviewed.

(Write YES or NO)

17. EDUCATION

NAME AND LOCATION OF UNIVERSITIES, COLLEGES OR TRADE SCHOOLS ATTENDED	DATES ATTENDED	CREDITS COMPLETED		MAJOR SUBJECT OR COURSE	UNITS COMPLETED IN MAJOR	DEGREES OR CERTIFICATES RECEIVED
		SEM. UNITS	QTR. UNITS			
	FROM					
	TO					
	FROM					
	TO					
	FROM					
	TO					

18. I acknowledge my responsibility to comply with any court-ordered child support obligations and understand that, as an employee of the City of Los Angeles, my name and any other information requested will be provided to the Los Angeles County District Attorney to assist the District Attorney's child support enforcement activities.

Initial _____

19. U.S. Military Service. To receive military credit of 5 points, allowed by City Charter, veterans must have served on active duty in one of the listed authorized periods and have been released from active duty within the previous 5 years. **Please check all that apply:**

Served on active duty from 12/7/41 - 12/3/46; 6/25/50 - 7/27/53; 1/1/64 - 8/15/73; 8/2/90 - 4/11/91 AND were separated within the last 5 years.

Your spouse was disabled or died as a result of wartime service

Disabled as a result of wartime service or were hospitalized after separation from active duty due to a service connected disability.

20. If stated on the bulletin, please attach a resume describing your work experience and education.