



City of San José – Employment Application

200 East Santa Clara Street, San José, California 95113
Phone: (408) 535-1285 | **Web:** www.sanjoseca.gov

The City of San José is an Equal Opportunity Employer. Applicants for all job openings will be considered without regard to age, race, color, religion, sex, national origin, sexual orientation, marital status, pregnancy or childbirth, disability, medical condition, veteran status or any other consideration made unlawful under any federal, state or local laws.

Please complete this application in its entirety. The City will only consider information contained on the application or supplemental materials specifically requested for this recruitment to determine your qualifications for the position in which you are applying. Incomplete or illegible applications may be disqualified. Documents submitted will not be returned. Resumes are not accepted in lieu of a completed application form.

POSITION APPLIED FOR:			POSITION REQUISITION ID #: _____ <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	
Last Name	First Name	Middle Initial	Other names under which you have worked:	
Address			Telephone Number (Home)	Telephone Number (Day)
City, State, Zip Code			E-mail Address	

Have you ever been employed by the City of San José? Yes No If yes, please specify Employee ID #:

Will you be authorized to work in the United States at time of hire by the City of San José? Yes No
 Please be informed that the City of San José will not sponsor, represent or sign any documents related to visa applications/transfers for H1-B or any other type of visa which requires an employer application.

Do you have any relatives employed by the City of San José? Yes No If yes, please identify first and last name, department and title, and relationship.

First Name	Last Name	Department	Title	Relationship

EDUCATION

Have you completed 8th Grade? Yes No | Do you have a High School diploma or equivalent (GED or CA Proficiency)? Yes No

Colleges, Universities (Name and Location)	Major	Total Units Earned		Degree Received (AA, BA, BS, MA, etc.)
		Semester	Quarter	

Languages spoken fluently, other than English which are related to the position for which you are applying for:
 Spanish Vietnamese Cantonese Mandarin Tagalog Ilocano Cambodian Sign Other:

Licenses or Certificates which are related to the position for which you are applying for:

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EMPLOYMENT HISTORY

Begin with your most recent experience. List experience gained in the last ten years, including periods of self-employment and military service. DO NOT omit any employers during the last 10 years. Include full details about experience that, in your opinion, makes you qualified for the job for which you are applying. **A resume will not, nor will reference to a resume, be accepted in lieu of providing complete information on a City application.**

Dates of Employment From: _____(Month) _____(Year) To: _____(Month) _____(Year)	Position Title Type of Business or Organization	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Hours/Week _____
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Name and Address (include City, State, Zip Code) of Current or Most Recent Employer	Name/Title of your Immediate Supervisor Supervisor Phone: _____ May we contact her/him? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Number of people and types of positions you supervised:

Description of Duties, Responsibilities, and Accomplishments

Dates of Employment From: _____(Month) _____(Year) To: _____(Month) _____(Year)	Position Title Type of Business or Organization	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Hours/Week _____
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Name and Address (include City, State, Zip Code) of Previous Employer	Name/Title of your Immediate Supervisor Supervisor Phone: _____ May we contact her/him? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Number of people and types of positions you supervised:

Description of Duties, Responsibilities, and Accomplishments

Dates of Employment From: _____(Month) _____(Year) To: _____(Month) _____(Year)	Position Title Type of Business or Organization	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Hours/Week _____
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Name and Address (include City, State, Zip Code) of Previous Employer	Name/Title of your Immediate Supervisor Supervisor Phone: _____ May we contact her/him? <input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

Number of people and types of positions you supervised:

Description of Duties, Responsibilities, and Accomplishments

Dates of Employment From: _____(Month) _____(Year) To: _____(Month) _____(Year)	Position Title Type of Business or Organization	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Hours/Week _____
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Name and Address (include City, State, Zip Code) of Previous Employer	Name/Title of your Immediate Supervisor Supervisor Phone: _____ May we contact her/him? <input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

Number of people and types of positions you supervised:

Description of Duties, Responsibilities, and Accomplishments

CERTIFICATION OF APPLICANT (READ CAREFULLY BEFORE SIGNING)

I hereby certify that that the information provided in my resume, all statements made in this application, and all statements made during the interview process are true and correct to the best of my knowledge. I agree and understand that any misstatement, falsification, or omission of material facts will cause forfeiture of my eligibility for employment. I understand that I give the right to the City of San José to check any information regarding my employment application.

Signature of Applicant: _____ Date: _____

HOW DID YOU FIRST LEARN OF THIS JOB OPPORTUNITY?

- | | |
|--|---|
| <input type="checkbox"/> (1) City of San José Website | <input type="checkbox"/> (6) Other Newspaper _____ |
| <input type="checkbox"/> (2) City of San José – Human Resources Department | <input type="checkbox"/> (7) Job Fair _____ |
| <input type="checkbox"/> (3) City of San José Employee | <input type="checkbox"/> (8) Internet Job Board _____ |
| <input type="checkbox"/> (4) Professional Journal _____ | <input type="checkbox"/> (9) Radio/TV/Theater _____ |
| <input type="checkbox"/> (5) San José Mercury News Newspaper | <input type="checkbox"/> (10) Other _____ |

Section 1233 of the California Government Code gives each applicant the opportunity to voluntarily indicate his/her identification on an employment application. Each applicant also has the opportunity to voluntarily identify any disability(s). This information will be used by the City of San José in conducting research and in compiling statistical reports regarding the composition of its job applicants and work force. It is illegal to use this information to discriminate against, or give preference to, a person for hiring or promotion. After this information has been recorded by the Human Resources Department, it will be removed from the application prior to review by hiring departments.

PLEASE INDICATE GENDER:

- Male | Female | Non-Binary | I do not wish to answer

PLEASE CHECK ONE BOX WHICH APPLIES TO YOUR ETHNIC GROUP:

- Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- White (Not Hispanic or Latino):** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American (Not Hispanic or Latino):** A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Pacific Islander (Not Hispanic or Latino):** A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian (Not Hispanic or Latino):** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native American or Alaska Native (Not Hispanic or Latino):** A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- Two or More Races (Not Hispanic or Latino):** All persons who identify with more than one of the above five races.

SUPPLEMENTAL QUESTIONNAIRE

We realize that the space provided by the standard application form is not sufficient for a detailed description of your background. The purpose of this supplemental questionnaire is to further assess your qualifications for the position of SCHOOL CROSSING GUARD. Please complete all sections of the standard application form, then complete the supplemental questionnaire to provide more detail. This form will be provided with the application at the School Safety Office.

1. Briefly describe your interest in this position.

2. Briefly describe your experience working with children. (You may include volunteer or personal experience).

3. Are you willing and able to work in bad weather? Yes No
4. Do you have other responsibilities or activities that might restrict your ability to work early morning, noon, and afternoon hours on school days? Yes No
5. Can you demonstrate your ability to get around the city by reading a map? Yes No
6. Do you have access to a motor vehicle on a daily basis? Yes No
7. Are you willing to drive to an assigned location anywhere in the City? Yes No
8. May we contact you as early as six (6) a.m. for an assignment? Yes No

ACKNOWLEDGMENT AND SIGNATURE

I, the undersigned, declare that all the responses to the questionnaire have been prepared by me and represent my independent work. I understand that all information provided may be subject to verification and reference. I also understand that I must pass a police background investigation and a physical examination prior to employment.

Signature _____

Date: _____

Approved Supplemental Questions

1. During the past ten years of employment history how many times have you been involuntarily terminated, failed probation or resigned to avoid being fired?

- 0
- 1
- 2
- 3
- 4+

2. Did you ever work (even on the side) without reporting it while collecting unemployment?

- No
- Yes, please explain:

3. Have you been issued any moving violations (Moving violations include: speeding, illegal U-turns, illegal lane changes, following too close.) in the last three (3) years? Do not include parking citations. If "yes", how many?

- None
- 1
 - 2
 - 3
 - 4
 - 5+

4. Have you been "at fault" in any traffic collisions within the last three (3) years where you were the driver? If "yes", how many? (At fault refers to you being the primary reason for the collision)

- None
- 1
 - 2
 - 3
 - 4
 - 5+

5. Do you currently have accounts in collections or are you delinquent (90+ days) in any payments you owe for credit cards, loans, child / spousal support, utility bills, taxes, or other debts?

No

Yes, please explain:

6. For the following questions related to criminal history, do not include sealed or expunged offenses.

How many times have you been convicted, pleaded guilty, or pleaded no contest to a misdemeanor as an adult?

0

1

2

3

4+

7. When was the last time you were convicted of a misdemeanor?

Does not apply

0-36 months

37 months-6 years

6+ years

8. How many times have you been convicted, pleaded guilty, or pleaded no contest to a felony?

0

1

2

3+

9. Have you ever been convicted of, pleaded guilty, or pleaded no contest to a domestic violence (273.5/243e PC)

No

Yes, please explain:

10. Have you ever been convicted of, pleaded guilty, or pleaded no contest to assault, battery, or resisting arrest as an adult?

- No
- Yes, please explain:

11. Have you ever been convicted of, pleaded guilty, or pleaded no contest to forgery or embezzlement?

- No
- Yes, please explain:

12. Have you ever been convicted of, pleaded guilty, or pleaded no contest to arson?

- No
- Yes, please explain:

13. Have you ever been convicted of, pleaded guilty, or pleaded no contest to any type of sex crime?

No

Yes, please explain:

14. Are you currently on court-ordered probation or parole for any offense, including traffic violations?

No

Yes, please explain:

15. Do you currently have any outstanding warrants for your arrest?

No

Yes, please explain:

16. "Since the age of 18, have you ever committed theft or embezzlement for an amount totaling \$950.00 or more? (This includes theft from an employer, items other than unintended supplies such as pens, pencils, etc...)"

No; I have never committed theft or embezzlement for an amount totaling \$950.00 or more.

Yes; I have committed theft or embezzlement for an amount totaling \$950.00 or more.

17. How many times have you been convicted of, pleaded guilty, or pleaded no contest to DUI?

None

1

2

3

4+

18. Have you ever caused or been convicted of, pleaded guilty, or pleaded no contest to a DUI accident involving death or injury to another person?

No

Yes, please explain:

19. Have you ever caused or been convicted of, pleaded guilty, or pleaded no contest to a reckless driving accident involving death or injury to another person?

No

Yes, please explain

20. Have you ever caused or been convicted of, pleaded guilty, or pleaded no contest to a vehicular manslaughter?

No

Yes, please explain

21. Have you ever slapped, punched, or otherwise injured a spouse or romantic partner (not in self-defense)?

- No
- Yes, please explain

22. Have you ever tried, used, or experimented with marijuana under limited circumstances? If "yes", when was the most recent time you smoked or ingested marijuana?

- No
- Yes; within the last 12 months
- Yes; more than 1 year ago, but less than 2 years
- Yes; more than 2 years ago, but less than 3 years
- Yes; more than 3 years ago, but less than four years
- Yes; more than four years ago, but less than five years
- Yes; more than five years ago

23. Have you ever tried, used or experimented with any substance or illegal drug, under limited circumstances (without a prescription) including: Cocaine Powder, Barbiturates (Downers), Hallucinogens (LSD, Mescaline, Mushrooms, and Peyote), GHB (Gamma-Hydroxybutyrate), Amphetamines, Methamphetamine, Amyl Nitrate, Quaaludes, Steroids or synthetic steroids, Designer drugs (Ecstasy, Bath Salts, Synthetic Heroin, etc.), Nitrous Oxide, Paint or any substance containing Toluene (for the purpose of getting high), Or any other illegal drug not listed above, OTHER than marijuana? If "Yes", when was the most recent time?

- No
- Yes; within the last 12 months
- Yes; more than 1 year ago, but less than 2 years
- Yes; more than 2 years ago, but less than 3 years
- Yes; more than 3 years ago, but less than four years
- Yes; more than four years ago, but less than five years
- Yes; more than five years ago

24. Have you ever used PCP, Heroin/Opiates/ Morphine/Demerol (other than a prescription drug or treatment legally prescribed to you), or Crack Cocaine?

- No
- Yes – please explain

25. As an adult, have you ever engaged in any of the activities listed below for drugs, narcotics or illegal substances, including marijuana? (Please check all that apply)

- Sold
- Furnished
 - Manufactured
 - Cultivated
 - None of the above.

The above list of supplemental questions for all SJPD applicants (sworn and civilian) have been reviewed and approved by the Chief's Office, City Attorney's Office and Human Resources.

Changes to the above questions or the level of background for candidates requires approval by the Chief's Office, City Attorney's Office and Human Resources.