## PLEASE READ!

# IMPORTANT INSTRUCTIONS FOR COMPLETING THIS FORM.

- 1. DO NOT USE THE RETURN KEY TO MOVE BETWEEN FIELDS. USE TAB KEY ONLY.
- 2. IF YOU HAVE DIFFICULTY WITH THIS FORM, PRINT OUT THE PDF VERSION AND COMPLETE. IT IS RECOMMENDED THAT APPLICANTS USE A TYPEWRITER TO COMPLETE THE PDF VERSION.

#### INFORMATION FOR APPLICANTS

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Thank you for your interest in serving the Humboldt County Office of Education. Because your qualifications will be initially determined on the basis of the information provided in the application, it is essential that this application form and all other supporting documents be complete and accurate in every respect. Resumes and vitas will be accepted; however, a thoroughly completed application form is required in order for you to be considered for the position. Therefore, do not use the phrase "see resume" or similar in the application or you will be subject to disqualification from the screening process.

To assist you in this procedure, we are providing these additional instructions for preparing the enclosed application materials:

- 1. Applications should be submitted only by persons who meet **all** of the required qualifications as indicated in the job specifications. Please review a copy of the job description before preparing and submitting the application.
- 2. For the sake of clarity, **every** item should have either an entry or the word "none" or "not applicable." It is recommended that applicants use a typewriter (for hard copy) or a computer (for online form) in completing these forms.
- 3. Verification of technical skills or certificates of completion for training programs may be provided with application. In some instances, providing current skills certificates will permit a waiver of competency tests otherwise required for employment. Contact the Personnel Office if you have specific questions.
- 4. Letters of recommendation from prior employers, supervisors, and/or training instructors are desirable and should accompany application if available and if they would assist in determining your overall qualifications for the position you are seeking.
- 5. Illegible or incomplete applications will not be processed. Please use care when filling out this application form.
- 6. Be sure to check the position announcement to see if any additional information is required to be submitted in addition to this application form. Completed application papers and confidential file must be filed with the Personnel Office no later than the deadline shown on the announcement. Candidates are encouraged to return their applications as early as possible
- 7. The following apply to the question about being convicted of a crime: a) A conviction includes a plea or verdict of guilty, a finding of guilt by a court in a trial without a jury, or a conviction following a plea of nolo contendere; b) You may exclude convictions for marijuana related offenses more than two years old; c) Expungement, discharge or other order by a court under Section 1203.4 of the Penal Code does not relieve you of your obligation to report all other felony or misdemeanor convictions on this application; d) State law requires all applicants prior to employment to be fingerprinted; e) Although generally a conviction does not bar employment, state law prohibits employment of any person convicted of certain sex and narcotic offenses and certain serious or violent felonies.

Completed application papers must be filed with the Personnel Office no later than the deadline shown on the announcement. Candidates are encouraged to return their applications as early as possible.

Should you need any assistance in filling out this form, please contact the Personnel Department staff.

The Humboldt County Office of Education is proud to support the principles of Equal Employment Opportunity and Affirmative Action and does not illegally discriminate against applicants on any basis protected by law. For more information on EEO/AA policies, please contact the Personnel Office.



#### **HUMBOLDT COUNTY OFFICE OF EDUCATION**

## Classified Service Application Form Note: Please read instructions prior to completing this form

Position Applied For:	
Name:	
Address (Street, City, State, Zip Code):	Email:
Home Telephone: Day Phone:	Cell Phone:
Have you previously worked for us?  yes [	no If yes, when?
I prefer: ☐ Full-time ☐ Part-time ☐ Subs Days/Hours Desired (if on call):	
HE SUCCESSFUL APPLICANT PASS A PHYSICAL EXAMINATION BEFORE EMPLOYMENT,	ST PRESENT EVIDENCE OF FREEDOM FROM THE DISEASE. SOME POSITIONS REQUIRE THAT SOCIAL SECURITY CARD AND VERIFICATION OF EMPLOYMENT ELIGIBILITY WILL BE REQUIRE OF EDUCATION WILL BE FINGERPRINTED (Ed. Code Section 45125), and APPLICANTS UNDER 1 PROVIDE A WORK PERMIT AND MUST RECEIVE CLEARANCE BEFORE EMPLOYMENT.
HIGH SCHOOL Name and Location:	
No. of years:	Did you graduate: ☐ yes ☐ no
Degree or Certificate:	
JR. COLLEGE Name and Location:	
No. of years:	Did you graduate: ☐ yes ☐ no
Course of Study:	Degree or Certificate:
OTHER COLLEGE OR UNIVERSITY Name and Locat	ion:
No. of years:	Did you graduate: ☐ yes ☐ no
Course of Study:	Degree or Certificate:
GRADUATE SCHOOL Name and Location:	
No. of years:	Did you graduate: ☐ yes ☐ no
BUSINESS, VOC., TRADE OR SERVICE SCHOOLS N	ames and Locations:
No. of years:	Did you graduate: ☐ yes ☐ no
Course of Study:	Degree or Certificate:
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No. of years:	Did you graduate: ☐ yes ☐ no
Course of Study:	Degree or Certificate:

LANGUAGE FLUENCY: Languages you can read, speak or write if use of a language other than English is relevant to the job for which you are making application: Type of Sign: Sign Language? **TECHNICAL SKILLS:** (Mark if applicable to opening) Skill Level: Beg. yes no Keyboarding Speed: Int. Adv. Word Processing or Skill Level: Beg. Int. Adv. yes no other Computer Skills Speed: Specify software and/or equipment used previously: If applying for an Instructional Aide position, you must pass the Paraprofessional Exam required by the State of California **PRIOR** to employment. Please indicate your present status in relation to this requirement: Yes, I passed the Paraprofessional Exam on (date): No, I have not passed the Paraprofessional Exam as of the date of this application. **EMPLOYMENT HISTORY** List all jobs and any periods of unemployment in the last ten years. Include any military service. **Current or Most Recent Employment Your Position Title:** Full-Time Part-Time **Employer: Employer's Address: Employment Dates: From:** Salary Upon Leaving: To: **Major Duties: Reason for Leaving:** 

**Immediate Supervisor:** 

**Phone Number:** 

**LICENSES/CERTIFICATES:** List any licenses or certificates you possess that qualify you for the vacant position:

Former Employer				
Your Position Title:		☐ Full-Time	☐ Part-Time	
Employer:		·		
Employer's Address:	_			
Employment Dates: From:	То:	Salary Upon Leaving:		
Major Duties:				
Reason for Leaving:				
Immediate Supervisor:		Phone Number:		
Former Employer				
Your Position Title:		☐ Full-Time	☐ Part-Time	
Employer:				
Employer's Address:				
Employment Dates: From:	То:	Salary Upon L	eaving:	
Major Duties:  Reason for Leaving:				
Immediate Supervisor:		Phone Number:		
Former Employer				
Your Position Title:		☐ Full-Time	☐ Part-Time	
Employer:				
Employer's Address:				
Employment Dates: From:	То:	Salary Upon Leaving:		
Major Duties:				
Reason for Leaving:				
Immediate Supervisor:		Phone Number:		

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to		ng or which made use o		or non-paid service which is related pecify nature of work performed,	
COI	NTRIBUTION: Describe why	you believe you are qua	alified for the position	n(s) applied for and what covering this item or submit	
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employment Name **Daytime Telephone Current Position/Title** Company ☐ Office Address Home Describe relationship to you (example: supervisor, co-worker, friend, etc.) Name **Daytime Telephone** Current Position/Title Company Address Home Office Describe relationship to you (example: supervisor, co-worker, friend, etc.) Name **Daytime Telephone Current Position/Title** Company Address Home Office Describe relationship to you (example: supervisor, co-worker, friend, etc.) Name **Daytime Telephone Current Position/Title** Company Address Home Office Describe relationship to you (example: supervisor, co-worker, friend, etc.) Name **Daytime Telephone Current Position/Title** Company Address Home ☐ Office Describe relationship to you (example: supervisor, co-worker, friend, etc.) Do you claim a Veteran's preference? Yes  $\square$ No [ If yes, appropriate documentation os service/discharge must accompany this application. Have you ever been convicted of a felony? (Read Instruction 7 on the Information for Applicants before answering this question.) Yes No 🔲 If yes, submit a separate confidential letter of explanation with application. Have you been arrested for any felony or misdemeanor for which you are currently out on bail or on your own recognizance? Yes No □ I certify that I meet all the minimum requirements as specified in the position announcement and/or job description and that all information contained in this application and in the supplementary material filed with it is true and accurate. I authorize the contact of any present or former employer to verify any information pertaining to this application, and I release from liability any persons or other organizations furnishing such information. I understand that any false statements or omissions of material facts on the application will subject me to disqualification from the application process or dismissal if employed. Date Signature

**REFERENCES:** List five individuals who are best able to attest to your qualifications and overall candidacy for

### VOLUNTARY SUPPLEMENTAL INFORMATION REQUEST FORM

To All Applicants:

The law requires that we keep certain statistics on applicants for Affirmative Action documentation. This information sheet is what we use to meet this requirement. However, the information requested on this sheet is strictly voluntary, and it is used by us only in filing state and federal reports. It is not considered in the screening or selection process in any manner, as it is separated from the application form before the written screening process is begun. Your name is not required on this form.

1. I prefer to be identified as (only one please):	
Asian Black Caucasian Filipino Hispanic Native American Other: Please Specify:	
2. Sex: M F  3. Date of Birth:	

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