



MOUNTAIN VIEW SCHOOL DISTRICT

3320 Gilman Rd., El Monte, CA 91732

Roberto Lopez-Mena, Assistant Superintendent of Human Resources

Ingrid Gonzalez, Personnel Technician (626) 652-4048

Website: www.mtviewschools.net

Application for Employment - Classified

POSITION DESIRED: _____ **DATE:** _____

PERSONAL INFORMATION:

First Name: _____ Last Name: _____ Middle Initial: _____

Address: _____
Street City State Zip Code

Home Phone: (____) _____ Cell Phone: (____) _____

Email: _____

Have you ever been employed here? Yes No Position: _____ Date(s): _____

RECORD OF EDUCATIONAL AND PROFESSIONAL PREPARATION:

Name of High School: _____ Highest Grade Completed _____ Graduated GED

1. Name of College/University/School: _____ Major/Field of Study: _____
Semester Units: _____ Quarter Units: _____ Degree Awarded: _____

2. Name of College/University/School: _____ Major/Field of Study: _____
Semester Units: _____ Quarter Units: _____ Degree Awarded: _____

3. Name of College/University/School: _____ Major/Field of Study: _____
Semester Units: _____ Quarter Units: _____ Degree Awarded: _____

(Note: You may be required to submit verification of coursework/education).

List Languages other than English that you are familiar with: _____

Read Speak Write Fluent Some

RECORD OF WORK EXPERIENCE:

List your work history below. Begin with your present or last position. Include volunteer, military or other special experience which applies to the position you are seeking.

1. **Employer:** _____

Date from: _____ to: _____ Current Employer Please don't contact

Address: _____

Name of Immediate Supervisor: _____ Phone: _____

Supervisor job title: _____ Your job title: _____

Job Duties: _____

Hours/week: _____

Reason for Leaving: _____

2. **Employer:** _____

Date from: _____ to: _____ Current Employer Please don't contact

Address: _____

Name of Immediate Supervisor: _____ Phone: _____

Supervisor job title: _____ Your job title: _____

Job Duties: _____

_____ Hours/week: _____

Reason for Leaving: _____

3. **Employer:** _____

Date from: _____ to: _____ Current Employer Please don't contact

Address: _____

Name of Immediate Supervisor: _____ Phone: _____

Supervisor job title: _____ Your job title: _____

Job Duties: _____

_____ Hours/week: _____

Reason for Leaving: _____

PROFESSIONAL REFERENCES:

1. Name: _____

Organization/Company: _____

Title: _____

Phone: (_____) _____

Email: _____

2. Name: _____

Organization/Company: _____

Title: _____

Phone: (_____) _____

Email: _____

3. Name: _____

Organization/Company: _____

Title: _____

Phone: (_____) _____

Email: _____

ATTACHMENTS:

Resume

Proof of HS completion

Copy of Degree: _____

Letters of Recommendation

Copy of Transcripts

Copy of Driver's License

Copy of ServSafe

Copy of CPR Certificate

BACKGROUND INFORMATION:

1. Have you ever been convicted of a felony or misdemeanor, or do you currently have a felony or misdemeanor charge pending? Convictions include a plea of guilty, nolo contendere (no contest) and/or finding of guilty by a judge or a jury, or a conviction that has been judicially dismissed or ordered sealed, including 'expungent' granted pursuant to Pen Code section 1203.4 (Note: Exclude convictions related to the use of marijuana that are over two years old).

(A misdemeanor may not necessarily disqualify you from employment. Failure to disclose will disqualify you).

Yes No (if Yes, please attach a written explanation of the circumstances)

If "Yes," list all convictions including, but not limited to convictions for "driving under the influence," and convictions for sex and/or drug offenses listed in California Education Code Sections 44010 and 44011, except for convictions related to marijuana if it is more than two years after the date of conviction. Include any serious or violent felony conviction in any state or jurisdiction as enumerated in California Penal Code sections 667.6(c) and 1192.7(c)

1: California Labor Code section 432.8 prohibition on asking about marijuana convictions does not apply to Health and Safety Code section 11359 (possession of marijuana for sale) and Health and Safety Code section 11378 (possession of a specific controlled substance). These convictions must be disclosed.

2. Have you ever been dismissed or asked to resign from any position? Yes No (if yes, please explain below):

3. If you need a reasonable accommodation to practice in the hiring process, the District/County office will provide you with one upon notice.

4. Driver's License:	Number	Class/Type	Expiration Date

5. Has your license ever been suspended/revoked: Yes No (if yes, please attach a written explanation of the circumstances)

6. Do you have relatives working here? Yes No (if yes, please list below):

Name(s)/relationship(s): _____

7. My submission of this application authorizes the school to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the School District/County Office and reference source from any liability in connection with its release or use. I waive my right of access to any such information, and without limitation hereby release the School District/County Office and reference source (except in relation to prior contractual agreements, public policy, legal/labor/education code, former employers and their agents or employees, provided by law) from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: the local law enforcement agencies, information from the Central Criminal Records Exchange or either data on all criminal convictions or certification that no data on criminal convictions are maintained, information from the California or other State Department of Social Services Child Protective Services Unit and any locality to which they may refer for release of information to any findings of child abuse or neglect investigations involving me.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission or falsely answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the School District/County Office.

Signature _____

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER