

Complete this section even if you attach a résumé.

EXPERIENCE: List all jobs you have held in the **LAST TEN YEARS. PUT YOUR PRESENT OR MOST RECENT JOB FIRST.** If you need more space, attach additional sheets.

Employer: _____ Supervisor's Phone: _____

Address: _____
Number Street City State Zip

Supervisor Name: _____ May we contact this employer? Yes No

Position Title: _____ Employed from _____ to _____ Last rate of pay: _____

Duties and Responsibilities: _____

Reason for leaving (be specific): _____

Employer: _____ Supervisor's Phone: _____

Address: _____
Number Street City State Zip

Supervisor Name: _____ May we contact this employer? Yes No

Position Title: _____ Employed from _____ to _____ Last rate of pay: _____

Duties and Responsibilities: _____

Reason for leaving (be specific): _____

Employer: _____ Supervisor's Phone: _____

Address: _____
Number Street City State Zip

Supervisor Name: _____ May we contact this employer? Yes No

Position Title: _____ Employed from _____ to _____ Last rate of pay: _____

Duties and Responsibilities: _____

Reason for leaving (be specific): _____

INFORMATION

1. The City of Woodland accepts and considers applications for eligibility lists or vacant positions only. Your completed application must be received by the HR Department by the final filing date and time as specified on the job announcement. Postmarks are not accepted.
2. Applicants will be notified of their status at the end of the recruitment process.
3. Complete all sections. Incomplete or illegible applications will not be considered.
4. Reasonable testing arrangements may be made to accommodate candidates with disabilities if a minimum of one week notice is given to the HR department.
5. Applicants selected for regular classified City appointment must successfully complete and pass a background investigation including, but not limited to, a medical examination and a drug/alcohol test.

CERTIFICATION: I hereby certify that all statements made on this application and any attachments are true and complete to the best of my knowledge. I understand that any false, incomplete or incorrect statement may result in my disqualification from the examination process or dismissal from employment with the City of Woodland. I authorize the City of Woodland to investigate my references, work record, education, or any matters relating to my suitability for employment. I authorize my former or current employers and educational institutions to release any information they may have concerning my employment or education, to the City of Woodland. I hereby give permission to the employer to seek to verify and supplement the information set forth in the application and I release from all liability, damages, or legal claims every person seeking or providing information, whether oral and written. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information. I further agree that if the City of Woodland is required to defend itself against any claim due to my breach of any provision in this Certification, then I shall pay for the City of Woodland's reasonable attorneys' fees. I also authorize the City of Woodland to obtain and review any documents or records, including driving records, which are applicable to my employment.

Signature of Applicant (Sign in Ink)

Date Signed