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| **California Park & Recreation Society**  **Application for Employment** | | | | | | | CPRS is an Equal Opportunity Employer.  Please print or type.  This application must be fully completed to be considered, even if you attach a resume. | | | |
|  | | | | | | | | | | |
| **Personal Information** | | | | | | | | | | |
| Name | |  | | |  | |  | |  | |
|  | | | | | | | | | | |
| Address | |  | | | City | | State | | Zip | |
|  | | | | |  | |  | |  | |
| Phone Number | | Mobile Number | | | Email Address | |  | |  | |
|  | |  | | |  | | | | | |
| Can you submit proof of legal employment authorization and identity? | | | | | | | | | | |
| Yes | No | | | |  |  | | |  | |
|  | | | | | | | | | | |
| **Position** | | | | | | | | | | |
| Position You Are Applying For | | | | | Available Start Date | |  | |  | |
|  | | | | |  | | | |  | |
| How did you hear about this position? | | | | | Can you travel if required by this position? | | | | | |
|  |  |  | |  | Yes | | No |  | |
|  | | | | | | | | | | |
| **Education** | | | | | | | | | | |
| School Name | | | Location | | Years Attended | | Degree Received | | Major | |
|  | | |  | |  | |  | |  | |
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| **[** | | | | | | | | | | |
| **References** | | | | | | | | | | |
| Name | | | | | Title | | Company | | Phone | |
|  | | | | |  | |  | |  | |
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| **Employment History** | | | | |
| **Employer (1)** |  | Job Title |  | Dates Employed |
|  | |  | |  |
| Job Summary |  | Immediate Supervisor and Title | | Phone |
|  | |  | |  |
| Address |  | City | State | Zip |
|  | |  |  |  |
| **Employer (2)** |  | Job Title |  | Dates Employed |
|  | |  | |  |
| Job Summary |  | Immediate Supervisor and Title | | Phone |
|  | |  | |  |
| Address |  | City | State | Zip |
|  | |  |  |  |
| **Employer (3)** |  | Job Title | | Dates Employed |
|  | |  | |  |
| Job Summary |  | Immediate Supervisor and Title | | Phone |
|  | |  | |  |
| Address |  | City | State | Zip |
|  | |  |  |  |
| **Employer (4)** |  | Job Title |  | Dates Employed |
|  | |  | |  |
| Job Summary |  | Immediate Supervisor and Title | | Phone |
|  | |  | |  |
| Address |  | City | State | Zip |
|  | |  |  |  |
|  | | | | |
| **Signature Disclaimer** | | | | |
| I certify that my answers are true and complete to the best of my knowledge.  I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.  **I hereby understand and acknowledge that, if hired, my employment relationship with CPRS would be of an ‘at will’ nature, which means that I may resign at any time and CPRS may discharge me at any time and for any reason. I further understand that this ‘at will’ employment relationship may not be changed by any written document or conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.**  In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge, whenever it may be discovered. | | | | |
| Name (Please Print) |  | Signature | | |
|  | |  | | |
| Date |  |
|  | |