CLASSIFIED
EMPLOYMENT APPLICATION

SOLANO
COMMUNITY COLLEGE

_____   _____
Position Applied For   Job # (refer to job announcement)

Date Received

Name_____
   Last   First   Middle

Address_____
   Number/Street/Apt. Number   City/State/Zip

Day Phone: (_____)_____ **Evening Phone**: (_____)_____

Social Security Number:_____   E-Mail Address:_____

EDUCATION:
High School: 9 10 11 12 (circle last year completed) School Name: _____

City/State: _____

College/University	Major	Minor	Degree	Degree Awarded Yes or No	# Units Completed

Other Training/Certificates/Licenses: (include issuance dates)	List Job Skills/Computer Software Skills

List experiences and training you possess which demonstrates your sensitivity to and understanding of the diverse academic, socio-economic, cultural, disability, and ethnic backgrounds of community college students.

4000 Suisun Valley Road • Suisun, CA 94585-3197 • Phone: 707/864-7128 • www.solano.cc.ca.us

EXPERIENCE: <u>DO NOT SUBSTITUTE A RESUME FOR THIS INFORMATION.</u> List your present employer first.
Account for all time during the past five years and for any employment pertinent to the qualifications of this position.
Attach a separate sheet if needed. Complete all information requested.

Dates Of Employment From Mo/Yr To Mo/Yr	Status FT PT	Hours Per Week	Job Title
			Job Duties (be specific)
Employer's Name, Address and Telephone Number			
Supervisor's Name and Title			Reason for Leaving_____

Dates Of Employment From Mo/Yr To Mo/Yr	Status FT PT	Hours Per Week	Job Title
			Job Duties (be specific)
Employer's Name, Address and Telephone Number			
Supervisor's Name and Title			Reason for Leaving_____

Dates Of Employment From Mo/Yr To Mo/Yr	Status FT PT	Hours Per Week	Job Title
			Job Duties (be specific)
Employer's Name, Address and Telephone Number			
Supervisor's Name and Title			Reason for Leaving_____

Dates Of Employment From Mo/Yr To Mo/Yr	Status FT PT	Hours Per Week	Job Title
			Job Duties (be specific)
Employer's Name, Address and Telephone Number			
Supervisor's Name and Title			Reason for Leaving_____

EXPERIENCE (Continued)

Dates Of Employment		Status	Hours Per Week	Job Title
From Mo/Yr	To Mo/Yr	FT PT		
				Job Duties (be specific)
Employer's Name, Address and Telephone Number				
Supervisor's Name and Title				
				Reason for Leaving_____

Dates Of Employment		Status	Hours Per Week	Job Title
From Mo/Yr	To Mo/Yr	FT PT		
				Job Duties (be specific)
Employer's Name, Address and Telephone Number				
Supervisor's Name and Title				
				Reason for Leaving_____

Please explain why you believe you are a strong candidate for this position.

GENERAL QUESTIONS: YES   NO

1. Can you, after employment, submit verification of your legal right to work in the United States?   ☐   ☐

2. Are you willing to sign the loyalty oath supporting the Constitution of the U.S. and State of California?   ☐   ☐
    If no, explain *on a separate piece of paper*.

3. Have you ever been convicted of any criminal offense?   ☐   ☐
    If yes, *on a separate piece of paper*, please state for each conviction the specific charge for which you were
    convicted, the date and place of conviction, as well as the jail/prison sentence or fine you received. Please be aware
    that certain offenses need not be reported (See California Code of Regulations, Title 2, section 11017.1). Regardless
    of Title 2, California Code of Regulations, section 11017.1, you must report all sex and drug offenses specified in
    Education Code sections 87010 and 87011. A record of conviction will not necessarily constitute a bar from
    employment.

4. In addition, Labor Code section 432.7 allows an employer to ask: Do you currently have any offenses pending against you
    in a criminal court of law for which you are out on bail or have been released on your own recognizance pending trial?   ☐   ☐
    If yes, *on a separate piece of paper*, please specify the charge(s), the county in which the charge(s) is/are pending,
    and the date of the trial, if set.

5. Have you ever been dismissed from employment for misconduct or unsatisfactory service?   ☐   ☐
    If yes, please explain *on a separate piece of paper*.

6. If a driver's license is required, please complete:
    License Number: _____ State: _____ Type: _____ Expiration: _____
    Has your driver's license ever been suspended or revoked?   ☐   ☐
    If yes, explain:
    _____

    _____

REFERENCE RELEASE:

Reference checking is an important component of the SCC hiring process and is completed on finalist candidates prior to formal recommendation of employment. **Immediate and former supervisors as well as others are contacted during the reference check process.** Please indicate your preference (check only one box):

☐   **I give my approval to contact my immediate and former supervisors and others during the reference
      check process. I authorize the disclosure of all information contained in my personnel files.**

☐   **I give my approval to contact my immediate and former employers, supervisors and others during the
      reference check process; however, I wish to be notified first before making the contacts. I authorize the
      disclosure of all information contained in my personnel files.**

For Interview Committee Use

Contact Date:_____ By:_____

CERTIFICATION OF APPLICANT (READ BEFORE SIGNING)

I authorize any representative of Solano Community College District to thoroughly investigate my background, including, but not limited to, my references, educational record, work experience, and/or disciplinary information. I release the District, its agents and all other persons and entities from any and all liability for damage that may result to me on account of their compliance with this authorization.

Signature:_____   Date:_____