



# CITY OF UNION CITY

34009 ALVARADO-NILES ROAD  
UNION CITY, CALIFORNIA 94587  
510-471-3232  
URL: www.ci.union-city.ca.us

## EMPLOYMENT APPLICATION

PRIOR TO HIRE, CANDIDATES MUST MEET THE DOCUMENTATIONS REQUIREMENTS OF THE IMMIGRATION REFORM AND CONTROL ACT OF 1986.

### FOR PERSONNEL USE ONLY

ACCEPTED \_\_\_\_\_ REJECTED \_\_\_\_\_  
BY: \_\_\_\_\_ EXPERIENCE \_\_\_\_\_  
DATE: \_\_\_\_\_ EDUCATION \_\_\_\_\_  
NOTE: \_\_\_\_\_

1 - POSITION YOU ARE APPLYING FOR:

\_\_\_\_\_

2 - NAME: LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

3 - ADDRESS: \_\_\_\_\_

4 - CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

5 - HOME PHONE: \_\_\_\_\_ 6 - BUSINESS PHONE: \_\_\_\_\_

7 - Have you ever been convicted of a criminal offense? YES NO Date \_\_\_\_\_  
Place \_\_\_\_\_  
Nature \_\_\_\_\_  
(An affirmative answer will not automatically disqualify you from being considered as a candidate for employment)  
8 - Name any relatives who work for the City of Union City  
\_\_\_\_\_  
\_\_\_\_\_

9 - If you are applying for the position of Police Officer, will you be 21 years of age by the time of appointment (within six months of the final filing date)? YES NO

10 - Social Security No. \_\_\_\_\_

11 - If you feel that you have any physical limitation that would require test accommodations, contact the Personnel Department at 510-471-3232.

12 - EDUCATION & TRAINING: Highest grade completed? \_\_\_\_\_ 14 - DID YOU GRADUATE? YES NO 15 - If not, do you have a GED or California High School Proficiency Certificate? YES NO

13 - HIGH SCHOOL LOCATION \_\_\_\_\_

| 16 - NAMES OF COLLEGES/UNIVERSITIES ATTENDED | Dates Attended | Course or Study/Major | Degree Awarded |       | Completed Semester / Quarter |       | Type of Degree | Date Degree Completed |
|--|----------------|-----------------------|----------------|-------|------------------------------|-------|----------------|-----------------------|
|  |                |                       | YES            | NO    | Units                        | Units |                |                       |
| _____  | _____          | _____                 | _____          | _____ | _____                        | _____ | _____          | _____                 |
| _____  | _____          | _____                 | _____          | _____ | _____                        | _____ | _____          | _____                 |

| 17 - OTHER RELEVANT COURSES AND TRAINING | NAME AND LOCATION OF INSTITUTION | Length of Course | Date Ended |
|--|----------------------------------|------------------|------------|
| _____                                    | _____                            | _____            | _____      |
| _____                                    | _____                            | _____            | _____      |
| _____                                    | _____                            | _____            | _____      |

| 18 - PROFESSIONAL LICENSE OR CERTIFICATE, IF REQUIRED | Serial No. | Date Issued | Expiration Date |
|---|------------|-------------|-----------------|
| _____   | _____      | _____       | _____           |
| _____   | _____      | _____       | _____           |

19 - Drivers License Number and State: \_\_\_\_\_ 20 - Skills, if Required for this Position: Typing Speed: \_\_\_\_\_ WPM

21 - List any Foreign Language in which you are fluent: \_\_\_\_\_ 22 - OTHER SKILLS: \_\_\_\_\_

23 - Give name and address of 3 persons who are familiar with your qualifications:

|       |         |       |       |
|-------|---------|-------|-------|
| _____ | _____   | _____ | _____ |
| Name  | Address | City  | Phone |
| _____ | _____   | _____ | _____ |
| Name  | Address | City  | Phone |
| _____ | _____   | _____ | _____ |
| Name  | Address | City  | Phone |



NAME: LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ POSITION APPLIED FOR \_\_\_\_\_.

WE NEED THE FOLLOWING INFORMATION TO COMPLY WITH FEDERAL EQUAL OPPORTUNITY REQUIREMENTS. INFORMATION WILL BE KEPT CONFIDENTIAL AND USED ONLY FOR STATISTICAL PURPOSES TO EVALUATE EQUAL OPPORTUNITY EFFORTS. THIS INFORMATION IS VOLUNTARY. IF YOU OBJECT, YOU NEED NOT COMPLETE THIS SECTION.

28 - Are you      MALE      FEMALE

29 - ETHNIC ORIGIN (Please check one)

White: All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

Black: All persons having origins in any of the Black racial groups.

Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish Culture or origin, regardless of race.

Asian or Pacific Islander: All persons, except Filipino, having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, and Samoa.

American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

Filipino: Persons of Filipino ancestry or ethnic origin.

30 - HOW DID YOU LEARN ABOUT THE EMPLOYMENT OPPORTUNITY FOR WHICH YOU ARE APPLYING?

Bulletin posted at City Hall

City's Website ([www.ci.union-city.ca.us](http://www.ci.union-city.ca.us))

Bulletin posted elsewhere (please specify)

Other Website (please specify)

Newspaper help wanted ad (please specify)

Posting with a Minority Organization or Group (please specify)

Radio Announcement

Posting with a Women's Organization or Group (please specify)

Television Announcement

NAME: LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_ POSITION APPLIED FOR \_\_\_\_\_

## APPLICATION PROCEDURES

### 1. Please Complete the Entire Application

- a. The entire application must be completed along with supplemental questionnaires (if applicable to the position for which you are applying).
- b. You may attach a resume, but you must still completely fill out the application.

### 2. Print, Sign and Mail or Deliver your Application

- c. Print the completed application on your local printer.
- d. Please check that all sections have been completed.
- e. Check carefully for errors. If you find any, go back and correct them before reprinting your application.
- f. Affix your signature the application where required.
- g. If the position you are applying for requires that you include a resume or other supplemental materials, include them with the application when you deliver or mail it to the City.
- h. Mail or deliver your completed, signed application and supporting materials to:  
  
**City of Union City**  
Personnel Department  
34009 Alvarado-Niles Road  
Union City, CA 94587
- i. Applications must be received by 5:00 p.m. of the date posted on the job announcement to be accepted for review. Postmarks can not be accepted. We regret that late applications cannot be considered.
- j. Please notify the Personnel Department if your address changes.

### For Further Information

24-hour Job Hotline 510-471-3232 ext. 339

E-mail: [union-city@ci.union-city.ca.us](mailto:union-city@ci.union-city.ca.us)

URL: [www.ci.union-city.ca.us](http://www.ci.union-city.ca.us)