Employment Application

1 PERSONAL INFORMATION

NAME [LAST]	NAME [FIRST]	NAME [MI]	MOBILE PHONE [INCLUDE AREA CODE]
STREET ADDRESS			**ALTERNATE PHONE** [INCLUDE AREA CODE]
CITY	**STATE**	**ZIP**	**PERSONAL EMAIL**

2 EMPLOYMENT DATA

DESIRED POSITION	DATE AVAILABLE	☐ FULL TIME ☐ PART TIME

HAVE YOU EVER WORKED FOR THE CA STATE LEGISLATURE?	HAVE YOU EVER WORKED FOR THE STATE OF CALIFORNIA?	REFERRED TO SENATE RULES COMMITTEE BY
☐ NO ☐ YES, SENATE ☐ YES, ASSEMBLY	☐ NO ☐ YES; DEPT:	

IF YOU ARE RELATED TO (A) CURRENT SENATE EMPLOYEE(S), PLEASE LIST THEIR NAME(S) AND YOUR RELATIONSHIP TO EACH.

For the purposes of the box above, "relative" is defined as a spouse, ex-spouse, child, parent, sibling, grandparent, grandchild, aunt, uncle, cousin, niece, nephew or corresponding in-law, "step" relation, domestic partner, or anyone related to you by marriage who is residing in the same household.

Are you currently receiving income/retirement benefits or have you made an application to retire from the California Public Employees' Retirement System (CalPERS)?   ☐ NO   ☐ YES

NOTE: *If you have retired from a CalPERS employer, you may only apply for retired annuitant positions unless you un-retire.*

3 EDUCATION

Please include verification of your degree with your completed application.

SCHOOL NAME AND LOCATION, BEGINNING WITH MOST RECENT	MAJOR / CONCENTRATION	DEGREE	EXPECTED DATE
		☐ COMPLETED	☐ IN PROGRESS
		☐ COMPLETED	☐ IN PROGRESS
		☐ COMPLETED	☐ IN PROGRESS
		☐ COMPLETED	☐ IN PROGRESS
		☐ COMPLETED	☐ IN PROGRESS

4 SKILLS

Do you have any other experience, training, qualifications or special skills which you feel may make you especially suited to performing the job you are applying for? If so, please explain below.

5 EMPLOYMENT RECORD

Include all relevant experience for the last 10 years beginning with most recent. Do not reference resume. To add additional jobs, see page 3.

COMPANY / INSTITUTION	☐ CURRENT EMPLOYER	# HRS/WK	OFFICIAL JOB TITLE	☐ PAID ☐ UNPAID

STREET ADDRESS	DUTIES
CITY / STATE	
FROM [MM/YY] / TO [MM/YY]	
SUPERVISOR	

TELEPHONE	MAY WE CONTACT? ☐ YES ☐ NO	REASON FOR LEAVING

COMPANY / INSTITUTION	☐ CURRENT EMPLOYER	# HRS/WK	OFFICIAL JOB TITLE	☐ PAID ☐ UNPAID

STREET ADDRESS	DUTIES
CITY / STATE	
FROM [MM/YY] / TO [MM/YY]	
SUPERVISOR	

TELEPHONE	MAY WE CONTACT? ☐ YES ☐ NO	REASON FOR LEAVING

COMPANY / INSTITUTION	☐ CURRENT EMPLOYER	# HRS/WK	OFFICIAL JOB TITLE	☐ PAID ☐ UNPAID

STREET ADDRESS	DUTIES
CITY / STATE	
FROM [MM/YY] / TO [MM/YY]	
SUPERVISOR	

TELEPHONE	MAY WE CONTACT? ☐ YES ☐ NO	REASON FOR LEAVING

6 DECLARATION

I declare under penalty of perjury that this statement has been completed by me and to the best of my knowledge and belief it is a true, correct and complete statement in answer to the questions contained herein.

SIGNATURE	DATE

5 EMPLOYMENT RECORD [CONTINUED FROM PAGE 2]

COMPANY / INSTITUTION	☐ CURRENT EMPLOYER	# HRS/WK	OFFICIAL JOB TITLE	☐ PAID ☐ UNPAID

STREET ADDRESS	DUTIES
CITY / **STATE**	
FROM [MM/YY] / **TO** [MM/YY]	
SUPERVISOR	

TELEPHONE	MAY WE CONTACT? ☐ YES ☐ NO	REASON FOR LEAVING

COMPANY / INSTITUTION	☐ CURRENT EMPLOYER	# HRS/WK	OFFICIAL JOB TITLE	☐ PAID ☐ UNPAID

STREET ADDRESS	DUTIES
CITY / **STATE**	
FROM [MM/YY] / **TO** [MM/YY]	
SUPERVISOR	

TELEPHONE	MAY WE CONTACT? ☐ YES ☐ NO	REASON FOR LEAVING

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STREET ADDRESS	DUTIES
CITY / **STATE**	
FROM [MM/YY] / **TO** [MM/YY]	
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CITY / **STATE**	
FROM [MM/YY] / **TO** [MM/YY]	
SUPERVISOR	

TELEPHONE	MAY WE CONTACT? ☐ YES ☐ NO	REASON FOR LEAVING