



10183 Truckee Airport Road
Truckee, CA 96161
Human Resources Dept.
530-582-2925
530-550-2343 fax

Town of Truckee Job Application

Submit by email function is temporarily unavailable. You may email your application to hr@townoftruckee.com

Date: _____

Position applying for: _____

Available for work: ☐ Full Time ☐ Part Time ☐ Temporary

Name: _____

(Please print) Last

First

Middle Initial

Mailing Address: _____ Contact Number: _____

City: _____ State: _____ Zip: _____ Email: _____

Have you ever been known by any other name, including maiden name? ☐ Yes ☐ No

If YES, state under what name(s): _____

Military Service: From: _____ To: _____ Are you over the age of 18? ☐ Yes ☐ No

Can you perform the essential duties of the job as listed in the job description? ☐ Yes ☐ No

If NO, give details: _____

Are you a Town of Truckee employee? ☐ Yes ☐ No

Check YES only if you are PRESENTLY employed by the Town in a regular position.

Are you related by blood or marriage to anyone presently employed by the Town of Truckee? ☐ Yes ☐ No

If yes, give name, relationship and department in which employed: _____

Did you graduate from high school? ☐ Yes ☐ No If No, did you have a G.E.D. certificate? ☐ Yes ☐ No

College and school after high school:

Name of School (Indicate if Graduate School or College)	Major	Years Attended From-To	Did you graduate?	Total Units or Hours	Degrees Received and Year

Are you prevented from becoming lawfully employed in this country because of Visa or Immigration Status?

(Proof of citizenship or immigration status will be required upon employment.) ☐ Yes ☐ No

If a license or certificate is a requirement of the position for which you are applying, and you possess the license or certificate, give the following information: Title: _____

Date Issued: _____ Expiration Date: _____

Do you have a valid driver's license? ☐ Yes ☐ No Class A? ☐ Yes ☐ No Class B? ☐ Yes ☐ No Class C? ☐ Yes ☐ No

Special Skills: Which of the following can you operate or perform? Typing: _____ Speed: _____ (wpm)

Calculator: _____ Computer Programs: _____

Other: _____

Previous Employment: List present job first. Use a separate block for each job title (even those with the same employer). Show all employment for the past 10 years (attach a separate sheet if necessary). Account for periods of unemployment in excess of 90 days. Your acceptance depends on the completeness and applicability of the information listed. Show exact job title and specific duties which you performed.

Dates of Employment From: _____ To: _____ <i>(Month / Year)</i>	Employer's Name & Address: _____ _____ _____	Title: _____ Reason for Leaving: _____
Responsibilities/Duties: _____ _____		
Dates of Employment From: _____ To: _____ <i>(Month / Year)</i>	Employer's Name & Address: _____ _____ _____	Title: _____ Reason for Leaving: _____
Responsibilities/Duties: _____ _____		
Dates of Employment From: _____ To: _____ <i>(Month / Year)</i>	Employer's Name & Address: _____ _____ _____	Title: _____ Reason for Leaving: _____
Responsibilities/Duties: _____ _____		
Dates of Employment From: _____ To: _____ <i>(Month / Year)</i>	Employer's Name & Address: _____ _____ _____	Title: _____ Reason for Leaving: _____
Responsibilities/Duties: _____ _____		
Dates of Employment From: _____ To: _____ <i>(Month / Year)</i>	Employer's Name & Address: _____ _____ _____	Title: _____ Reason for Leaving: _____
Responsibilities/Duties: _____ _____		

REFERENCES: Must be persons over 21 years of age who have known you for more than one year and are not related to you by blood or marriage.

Name	Address	Phone Number

Certificate of Applicant (Read this statement carefully before signing): I hereby certify that all statements made on or in connection with this application, including those regarding my training and experience, are true and complete to the best of my knowledge. I understand that any misstatements or omissions of material fact herein may be cause for denial of employment or termination.

NOTE: The Town of Truckee's policy is to make reasonable accommodations to the needs of job applicants and employees who are disabled individuals. Please notify the Personnel Department if special testing arrangements are required to accommodate your disabilities.

Town employment requires the successful completion of a physical examination, a drug screen, and a background check. By submitting this application you are consenting to take or allow to be taken any action required to complete those steps, including providing a copy of your DMV record to the Town. For further information, please contact the Human Resources Department. If you received this form electronically and are returning via e-mail, you will be required to sign an original version of the application prior to being interviewed for the position.

Signature: _____ **Name (please print):** _____ **Date:** _____