



California School Boards Association

# Application for employment

3251 Beacon Blvd., West Sacramento, CA 95691 | (916) 371-4691 | Fax: (916) 669-3321

*To track the status of this and other employment opportunities, please visit our website at [www.csba.org](http://www.csba.org)*

## Instructions and Information

- Please complete all pages of the Application for Employment fully and legibly. Furnishing information is mandatory, unless otherwise stated.
- Resumé and supporting material may be attached; resumé cannot be used to replace employment history.
- Application may be submitted by email to [jobs@csba.org](mailto:jobs@csba.org), in person, by mail, or fax.
- A separate application packet must be submitted for each opening.
- Applications and supporting materials will not be returned.

Job-related background checks, which may be required for certain positions designated as sensitive, will be conducted and completed before appointment or promotion to that position. Your signature on the application is your consent and authorization for CSBA or its authorized agent to conduct a background investigation related to the sensitive position for which you are applying.

CSBA is an equal opportunity employer and complies with applicable federal and state law. CSBA prohibits discrimination of any person employed or seeking employment with CSBA on the basis of race, religion, color, national origin, ancestry, age, marital status, pregnancy, physical or mental disability, medical condition, genetic information, veteran status, gender, gender identity, gender expression, sex, sexual orientation, or any other characteristic protected by state or federal law. Inquiries regarding CSBA equal employment opportunity policies may be directed to:

**CSBA Human Resources**  
**3251 Beacon blvd, West Sacramento, CA**  
**95691 (916) 371-4691**  
**Resume fax: (916) 669-3321**



# Application for employment

Please type or print clearly using a pen

Position Title: \_\_\_\_\_ Final Filing Date (FFD): \_\_\_\_\_

Name: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

Address: \_\_\_\_\_  
(NUMBER & STREET) (CITY) (STATE) (ZIP)

Telephone: \_\_\_\_\_  
(HOME) (BUSINESS) (MESSAGE OR CELL)

E-mail (OPTIONAL): \_\_\_\_\_

1. You must be at least 18 years of age, or, if under 18, you must have graduated from high school or have a valid work permit in order to be employed by CSBA. Do you meet this requirement?  
 Yes  No
2. If hired, can you present evidence of your U.S. citizenship or proof of your legal right to work in this country?  Yes  No
3. Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?  Yes  No  
If no, describe the functions that cannot be performed. \_\_\_\_\_  
CSBA complies with the Americans with Disabilities Act (ADA) and will consider reasonable accommodations that may allow eligible applicants and employees to perform essential functions.
4. Are you available to work: (check all appropriate spaces)  Weekends  Holidays  Overtime
5. Do you have any relatives employed by CSBA?  Yes  No  
(If YES, please provide name(s), department(s) and relationship(s)) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Questions 6 and 7 MUST BE ANSWERED for application to be considered.**

6. Have you ever been released or discharged from employment or resigned to avoid such release or discharge?  Yes  No (If YES, please explain): Date of discharge or resignation: \_\_\_\_\_  
Reason for discharge or resignation: \_\_\_\_\_  
\_\_\_\_\_
7. Since your 18th birthday, have you been convicted of a felony?  Yes  No  
Since your 18th birthday, have you been convicted of a serious misdemeanor?  Yes  No  
If yes to either question, please list circumstances, place(s), and date(s): \_\_\_\_\_  
\_\_\_\_\_

A conviction will not necessarily disqualify you from employment. Convictions for marijuana-related offenses that are more than two years old need not be listed. Your case will be considered individually, in relation to the position for which you have applied.

8. Have you ever worked for CSBA?  Yes  No

If YES, please list dates you were employed by CSBA: From: \_\_\_\_\_ To: \_\_\_\_\_

9. Driver's license # \_\_\_\_\_ State: \_\_\_\_\_

**10. Education and Training** (include military training) You may attach additional information.

EDUCATION/TRAINING FACILITY (LIST NAME & LOCATION)	SUBJECTS STUDIED (LIST MAJOR & MINOR, IF APPLICABLE)	UNITS TAKEN	DEGREE RECEIVED (AA, BS, MS, PHD, ETC.)

**11. Professional/Technical Licenses/Certificates**

(Mandatory only if required for the position for which you are applying)

TYPE OF LICENSE OR CERTIFICATE	LIC/CERT #	STATE/ORGANIZATION ISSUED BY	EXPIRATION DATE

12. Language(s) other than English:

Language(s) \_\_\_\_\_  Speak  Read  Write  Interpret and/or Translate

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**Employment Record:** List your present or most recent employer first. Describe your employment history, accounting for all time during at least the past five years. You may include volunteer and paid experience. DO NOT substitute a resume. You may attach additional information.

**May we contact each of your current or previous employers?**  Yes  No

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Immediate Supervisor & Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Your Job Title: \_\_\_\_\_

Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Job Duties (brief statement; be sure to list all duties related to this position): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Immediate Supervisor & Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Your Job Title: \_\_\_\_\_  
Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
Job Duties (brief statement; be sure to list all duties related to this position): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Immediate Supervisor & Title: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Your Job Title: \_\_\_\_\_  
Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
Job Duties (brief statement; be sure to list all duties related to this position): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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\_\_\_\_\_  
INITIALS I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_  
INITIALS I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further authorize the references I have listed to disclose to the company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition I hereby release the company, my former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_  
INITIALS I understand that nothing contained in the application, or conveyed during my interview which may be granted or during my employment, if hired, is intended to create an employment contract between the company and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by the company's designated representative and me.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Human Resources Use Only**

Typing \_\_\_\_\_ wpm  No Typing  Referred  Not Referred  Screened by: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for non-referral: \_\_\_\_\_



California School Boards Association

# Applicant survey

PROVIDING THIS DATA IS VOLUNTARY AND WILL BE KEPT CONFIDENTIAL. Choosing not to complete this form will not affect your opportunity for employment with CSBA.

Position Title: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
NUMBER & STREET CITY STATE ZIP

Phone: \_\_\_\_\_  
(HOME) (WORK)

Social Security No. (optional) \_\_\_\_\_

How did you learn about this position? (Please check one only and enter name of source, if applicable):

- Advertisement
- Recruitment Specialist
- Community Agency
- Internet
- Professional Organization
- Friend or Colleague
- Job Fair
- Other

Name of Source: \_\_\_\_\_

**Sex** (Please check one):

- Female
- Male

**Race/Ethnicity** (Please check one):

- American Indian/Alaskan Native
- East Indian/Pakistani
- African American
- Dominican Republican
- Cuban & Puerto Rican
- Mexican/Mexican American
- South/Central American
- Spanish/Spanish American
- Chinese/Chinese American
- Caucasian
- Filipino
- Japanese/Japanese American
- Other Asian (*including the Far East*)
- Pacific Islander, Samoan
- Southeast Asian
- Other \_\_\_\_\_