

Riverside Sheriffs' Association is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief or disability.

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Personal Data

First Name	Middle	Last	Last	
Street Address	City	State	Zip Code	
Home Telephone Number	Social Security Number	Today's	Today's Date	
Daytime Telephone Number	_ at which we may contact you			
Are you 18 years of age or ol	der? Yes No			
Have you ever been convicted	d of a crime? Yes	No		
If "yes", please explain:				
Position Preferences				
For what position are you app	olying?			
Salary desired: \$	per(speci	fy hour, we	ek or year)	

Schedule desired: Full Time ____ Part Time ____ # of Hours Per Week _____

Are you willing to work occasional overtime? _Yes	No
What date could you start work?	
Education	
High School School Name:	
City and State:	
Grade Point Average:	
Diploma or GED?:	
College School Name:	
City and State:	
Degree or # of Years Completed:	
Major or Subject:	
Grade Point Average:	
College School Name:	
City and State:	
Degree or # of Years Completed:	
Major or Subject:	
Grade Point Average:	
Graduate School School Name:	
City and State:	
Degree or # of Years Completed:	

Major or Subject:

Grade Point Average: _____

List any certificates earned or in progress, and/or any additional training programs not included in your formal education.

List any Professional Affiliations to which you belong (please do not list activities which would indicate age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief, or disability):

Previous Employment

List your current or most recent employment first. Include work related internships, military and volunteer work.

Current Employer:
City and State:
Telephone Number:
Supervisor's Name and Title:
Position Title:
Reason for Leaving:
Salary: \$ per (specify hour, week or year)
Dates of Employment: From: To:
May We Contact Your Employer: Yes No

Previous Emplo	oyer:				
City and State:					
Telephone Nun	nber:				
Supervisor's Na	me and Title:				
Position Title:					
Reason for Lea	ving:				
Salary: \$	I	per	_(specify	hour, week o	or year)
Dates of Emplo	yment: Fro	om:	To:		
May We Conta	ct Your Emplo	oyer: Yes _	No		
Previous Emplo	oyer:				
City and State:					
Telephone Nun	1ber:				
Supervisor's Na	me and Title:				
Position Title:					
Reason for Lea	ving:				
Salary: \$	I	oer	_(specify	hour, week o	or year)
Dates of Emplo	yment: Fro	om:	To:		
May We Conta	ct Your Emplo	oyer: Yes _	No		
Personal Ref	ferences				
Name	Title	Company		Phone	Professional Relationship

Releases and Applicant's Signature

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to Riverside Sheriffs' Association and/or any of its agents to obtain the above information from such sources as described above. This authorization and consent shall be valid in original, fax, or copy form.

Initials

All hiring and employment at Riverside Sheriffs' Association is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by Riverside Sheriffs' Association has no specific term and may be terminated by the employee or Riverside Sheriffs' Association with or without notice. I acknowledge that Riverside Sheriffs' Association has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with Riverside Sheriffs' Association, and that failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to Riverside Sheriffs' Association I agree to release and hold harmless Riverside Sheriffs' Association from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with Riverside Sheriffs' Association may be terminated.

Applicant's Name

Date

Applicant's Signature

Date

Applicant Release

Riverside Sheriffs' Association

In connection with my application for employment (including contract for services) and as a condition of continuing employment, I understand that investigative background inquiries are to be made on me including consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, and experience along with reasons for termination of employment from previous employers. Further I understand that the company will be requesting information from various Federal, State, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies.

I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information by Riverside Sheriffs' Association and/or any of its agents. This authorization and consent shall be valid in original, fax, or copy form.

Applicant's Signature

Date

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose:

Please Print Clearly:

Print Full Name:	Sex: Male Female
Print other names you have used:	Dates used:
Date of Birth (mm/dd/yy):	_ Social Security #:
Current Drivers License #:	_ Issuing State:
Other Drivers License #s:	_ Issuing State:

Home Addresses (for the last 7 years, list most current first -- use back for more space):

Street:		_ City:	State:
Zip:	County:		
From - To Dates:			
Street:		_ City:	State:
Zip:	County:		
From - To Dates:			
Street:		_ City:	State:
Zip:	County:		
From - To Dates:			
Street:		_ City:	State:
Zip:	County:		
From - To Dates:			
Street:		_ City:	State:
Zip:	County:		
From - To Dates:			

Check here if there are addresses listed on back _____

Professional Autobiography

In 500 words or less, please provide a brief statement outlining your work experience, professional goals and why you desire a position with the Riverside Sheriffs' Association.

