



# Employment

Please give accurate, complete full time and part-time employment record. Resumes are NOT accepted in place of any part of this application. Start with present or most recent employer. Attach additional sheets if required.

1. Employer's Name and Address \_\_\_\_\_

Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Dates Employed     /    /     to     /    /     Salary           Full Time  Part Time   
Month Year Month Year Beginning Ending

Describe your job duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

2. Employer's Name and Address \_\_\_\_\_

Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Dates Employed     /    /     to     /    /     Salary           Full Time  Part Time   
Month Year Month Year Beginning Ending

Describe your job duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

3. Employer's Name and Address \_\_\_\_\_

Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Dates Employed     /    /     to     /    /     Salary           Full Time  Part Time   
Month Year Month Year Beginning Ending

Describe your job duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

4. Employer's Name and Address \_\_\_\_\_

Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Dates Employed     /    /     to     /    /     Salary           Full Time  Part Time   
Month Year Month Year Beginning Ending

Describe your job duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Employment (con't)

5. Employer's Name and Address \_\_\_\_\_

Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Dates Employed     /    /     to     /    /     Salary           Full Time  Part Time   
Month Year Month Year Beginning Ending

Describe your job duties \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

6. Employer's Name and Address \_\_\_\_\_

Title \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Dates Employed     /    /     to     /    /     Salary           Full Time  Part Time   
Month Year Month Year Beginning Ending

Describe your job duties \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

\_\_\_\_\_

### References

Give three professional references of persons who are qualified to answer questions regarding your current/former employment and/or your qualifications for the position you seek.

1. Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Address \_\_\_\_\_

2. Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Address \_\_\_\_\_

3. Name \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Address \_\_\_\_\_

#### **My Signature below declare all of the following:**

I hereby declare that all information given by me in this application is true and complete to the best of my knowledge.

I authorize El Camino College to contact employers and references and I release from all liability persons and organization reporting information required by the application.

I understand that any false statement, misrepresentation or significant omission on the above application may be cause for immediate dismissal from El Camino College. I further agree to abide by all College regulations, policies and procedures.

SIGNATURE OF APPLICANT \_\_\_\_\_ Date \_\_\_\_\_

**The El Camino College District's policy and practice is to afford equal opportunity or employment to all individuals regardless of race, color, religion, sex, sexual orientation, national origin, marital status, handicap or status as a Vietnam-era Veteran. This policy and practice of equal opportunity in employment is in accordance with both state federal regulations.**

## ■ El Camino College is an Affirmative Action - Equal Opportunity Employer

### Equal Employment Opportunity Survey

The following information is necessary for the El Camino Community College District to evaluate its hiring practices and to prepare reports requested by law for the state and federal government. The information will be confidential and will not be used to make a decision about your employment. Your cooperation by providing the information on a voluntary basis will be appreciated. This form will be separated from your application and will not be seen by a reviewing committee.

Name \_\_\_\_\_ Date \_\_\_\_\_

Position applying for: \_\_\_\_\_

Please check boxes which identify you

#### **Ethnic Identification** (Check one below)

American Indian or Alaskan Native

Asian

African American

Hispanic

Filipino

Pacific Islander

Caucasian

**Male**

**Female**

Under age 30

Age 30 but less than 40

Age 40 but less than 55

Age 55 or more

Disabled

Vietnam-era Veteran

Please indicate from what source you learned of this position:

#### **Newspaper Ad:**

LA Times

Daily Breeze

La Opinion

LA Sentinel

Other \_\_\_\_\_

#### **Job Flyer:**

Posted at ECC

Mailed by ECC

EDD Office

Mailed by CCC Registry

Other \_\_\_\_\_

#### **Other Sources:**

CCC Job Fair

Other Job Fair

College Employee

Relative

Friend

Completing the demographics portion of this form is optional, however, the form must be returned as part of your application packet. Please help us by filling out the *Name* and *Position Applying For* portion of this form.