



A PRIVATE NONPROFIT

Community Action Commission OF SANTA BARBARA COUNTY

Employment Application

5638 Hollister Avenue, Suite 230 Goleta, California 93117 (805) 964-8857 ext. 116 (805) 683-4276 HR Fax http://www.cacsb.org

Personal Information

Form section for Personal Information including fields for Last Name, First Name, Middle, Current Address, Mailing Address, Email address, Cell phone, Home phone, and various yes/no questions.

Employment Desired

Form section for Employment Desired including questions about application type (Full Time, Part Time, etc.) and region(s) interested in.

Skills, Education and Additional Information

Form section for Skills, Education and Additional Information including questions about languages, licenses, and software knowledge.

Form section for High School information including fields for High School Name, City, State, Zip Code, and Did you Graduate?

<b>Vocational/Business Degree or Diploma:</b>		Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name: _____	Years completed _____	
City: _____	State: _____	Zip Code: _____
<b>College/University Degree or Diploma:</b>		Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
College/University Name: _____	Years completed _____	
City: _____	State: _____	Zip Code: _____
<b>College/University Degree or Diploma:</b>		Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
College/University Name: _____	Years completed _____	
City: _____	State: _____	Zip Code: _____
<b>College/University Degree or Diploma:</b>		Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
College/University Name: _____	Years completed _____	
City: _____	State: _____	Zip Code: _____

Do you have any other experience, training, qualifications, or skills that you feel make you especially suited for employment at CAC?

### Employment History

List below all present and past employment starting with your most recent employer (last ten years is sufficient). **You must complete this section even if you are attaching a resume.** You may also list significant experience including any verified work performed on a voluntary basis. Please include all information requested.

		Current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer Name _____	Phone Number _____	
Type of Business _____	Your Supervisor's Name _____	
Dates of Employment _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Annual	Starting Pay _____ Ending Pay _____
From _____ To _____		
Your Position: _____	May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Essential Duties: _____		
Reason for leaving? _____		
Employer Name _____	Phone Number _____	
Type of Business _____	Your Supervisor's Name _____	
Dates of Employment _____	<input type="checkbox"/> Hourly <input type="checkbox"/> Annual	Starting Pay _____ Ending Pay _____
From _____ To _____		
Your Position: _____	May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Essential Duties: _____		
Reason for leaving? _____		

Employer Name _____	Phone Number _____
Type of Business _____	Your Supervisor's Name _____
Dates of Employment _____ From                      To	<input type="checkbox"/> Hourly <input type="checkbox"/> Annual   _____ Starting Pay      Ending Pay
Your Position: _____	May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Essential Duties: _____	
Reason for leaving? _____	

Employer Name _____	Phone Number _____
Type of Business _____	Your Supervisor's Name _____
Dates of Employment _____ From                      To	<input type="checkbox"/> Hourly <input type="checkbox"/> Annual   _____ Starting Pay      Ending Pay
Your Position: _____	May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Essential Duties: _____	
Reason for leaving? _____	

**References**

List below two persons not related to you who have knowledge of your work performance.

First Name _____	Last Name _____	Phone Number _____
Address _____	City _____	State      Zip _____
Occupation _____		# of years acquainted _____

First Name _____	Last Name _____	Phone Number _____
Address _____	City _____	State      Zip _____
Occupation _____		# of years acquainted _____

**PLEASE READ CAREFULLY , INITIAL EACH PARAGRAPH AND SIGN BELW**

\_\_\_\_\_  
Initial

I understand that nothing contained in the application, conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Agency. 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 CAC, and that no promises or representations contrary to the foregoing are binding on CAC unless made in writing and signed by me and the Agency's designated representative.

\_\_\_\_\_  
Initial

I understand the Community Action Commission of Santa Barbara County is a county-wide employer; therefore, I may be required to travel to attend meetings, trainings or relocate my work site to a different CAC location.

\_\_\_\_\_  
Initial

I hereby authorize Community Action Commission of Santa Barbara County to thoroughly investigate my references, work record, education and other matters related to my suitability for employment unless otherwise specified above. I further, authorize the references I have listed to disclose to CAC any all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release CAC, my former employers and all other persons, corporations, partnerships and associations from any all claims, demands or liabilities arising out or in any way related to such investigation or disclosure.

\_\_\_\_\_  
Initial

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.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature



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Action  
Commission  
OF SANTA BARBARA COUNTY

## Voluntary Affirmative Action Survey

Confidential Information  
NOT included in selection process

We appreciate your interest in employment with Community Action Commission of Santa Barbara County. Be assured that your application and/or resume will be given thorough consideration, and that you will be appropriately advised of your status in the selection process.

We are interested in reaching the broadest possible pool of qualified applicants. This survey has been devised to assist us in monitoring the effectiveness of our recruitment efforts, and to assist in collecting data which is required for compliance with various State and Federal reporting requirements. Your cooperation and participation is voluntary and would be greatly appreciated. This information will be kept separate and confidential and will not be used in any way to make any employment decisions.

Thank you for your cooperation!

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

Male  Female

\_\_\_\_\_  
Gender Position(s) desired

**Ethnic Origin:** Check the box corresponding to the ethnic origin with which you most closely identify. **Check only one box.**

- Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin regardless of race.
- White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.
- Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment
- Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.

**Referral Source:** How did you hear about this opening? (Please check all that apply)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> CAC Human Resources Department   | <input type="checkbox"/> Cal-Jobs               | <input type="checkbox"/> Santa Barbara News Press |
| <input type="checkbox"/> CAC Career Opportunities Posting | <input type="checkbox"/> Craigslist             | <input type="checkbox"/> Ventura Star Free Press  |
| <input type="checkbox"/> CAC Employee                     | <input type="checkbox"/> Linked In              | <input type="checkbox"/> Valley Voice             |
| <input type="checkbox"/> CAC Email Blast                  | <input type="checkbox"/> Lompoc Record          | <input type="checkbox"/> Santa Maria Times        |
| <input type="checkbox"/> CAC site :                       | <input type="checkbox"/> SLO Tribune            | <input type="checkbox"/> The Independent          |
| <input type="checkbox"/> Friend or relative               | <input type="checkbox"/> Community Organization | <input type="checkbox"/> Walk In                  |

Other: \_\_\_\_\_