



COMMUNITY BRIDGES

**COMMUNITY BRIDGES IS COMMITTED TO STRENGTHENING OUR
DIVERSE COMMUNITY THROUGH INNOVATIVE HUMAN SERVICES.
BUILDING BRIDGES- ELIMINATING BARRIERS**

APPLICATION FOR EMPLOYMENT

Thank you for your interest with Community Bridges. We are an equal opportunity employer and all applicants will be given equal consideration. Community Bridges does not discriminate against any applicant or employee because of race, color, age, sex, religion, disability, national origin, sexual orientation, marital status, veteran status, or any other legally protected status. Answers to application questions will be used for applicable, job-related reasons only. No application will be considered unless complete.

236 Santa Cruz Avenue Aptos, CA 95003- Telephone: (831) 688-8840 ext. 200, Fax: (831) 688-8302
www.communitybridges.org

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION (Please Print)

Last Name	First	Middle Initial	Today's Date	
Street Address			Social Security Number	
City	State	ZIP Code	Home Phone Number	
Other Name(s) Used			Alternate Phone Number or E-Mail	
Referred By (please be specific)			Position Applying for	
Do you have any relatives employed by this Company or its affiliates? If yes, give specifics:			Annual Salary Desired \$	Date Available
Would you be willing to relocate? ____ If yes, where?	Are you willing to travel? ____ If yes, up to what % of time?		Are you willing to work overtime? Yes or No	
Are you over the age of 18? ____ Yes ____ No If not, please provide your age: _____				
Have you signed an employment contract, confidentiality agreement or any other contract, which might affect your employment with Community Bridges? (If yes, please provide a copy to us.) ____ Yes ____ No				
Are you eligible to work in the United States? ____ Yes ____ No [Proof of eligibility to work in the United States will be required before an individual can commence employment at Community Bridges].				
U.S. Military or Coast Guard Service? ____ Yes ____ No Highest Rank: _____				
Driver's License Information: State: _____ Number: _____ Exp Date: _____				
Is Your driver's license restricted or suspended? ____ Yes ____ No If yes, give details: _____				
<p>1. Have you been convicted of a felony within the past seven years? ____ Yes ____ No</p> <p>2. Have you been convicted of a misdemeanor within the past five years (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, marijuana related offenses**, affray or disturbance of the peace)? ____ Yes ____ No</p> <p>3. Have you completed a period of incarceration within the past five years for any misdemeanor (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, marijuana related offenses**, affray or disturbance of the peace)? ____ Yes ____ No</p> <p>4. If the answer to question number 3 above is "yes" please state whether you were convicted more than five years ago for any offense (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, marijuana related offenses**, affray or disturbance of the peace)? ____ Yes ____ No</p>				
<p>An applicant for employment with a sealed or expunged record may answer "no" with respect to any inquiry herein relative to convictions. In addition, any applicant for employment may answer "no" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services that did not result in a complaint transferred to the superior court for criminal prosecution. Additionally, no applicant will be denied employment simply based on an affirmative response herein; factors such as the type and seriousness of the crime, the frequency of the violations, the age at the time, the entire work and education history and the nature of the job sought will be taken into consideration. If your response to any of the foregoing questions was "yes," then please provide the following information on a separate page and attach it with your application: (1) date of conviction, (2) charge, (3) location and (4) the sentence and/or outcome.</p>				
<p>*Applicants may answer "no" if they were convicted of any misdemeanor marijuana related offenses that are more than two years old</p>				

EMPLOYMENT HISTORY (please list all previous employment, beginning with present or most recent. If additional space is required attach a separate document.) In addition, please account for all gaps in employment.

Company		Address	Telephone
Date (month/year) From: To:	Hours per week:	Salary Starting: Ending:	Supervisor
Position Title		Reason For Leaving	May we contact?
Duties and Responsibilities			Eligible for Rehire?
Gaps in Employment (if any)			

Company		Address	Telephone
Date (month/year) From: To:	Hours per week:	Salary Starting: Ending:	Supervisor
Position Title		Reason For Leaving	May we contact?
Duties and Responsibilities			Eligible for Rehire?
Gaps in Employment (if any)			

Company		Address	Telephone
Date (month/year) From: To:	Hours per week:	Salary Starting: Ending:	Supervisor
Position Title		Reason For Leaving	May we contact?
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Position Title		Reason For Leaving	May we contact?
Duties and Responsibilities			Eligible for Rehire?
Gaps in Employment (if any)			

REFERENCES (Professional; Previous Supervisors Are Preferred)

Name	Name
Company	Company
Telephone	Telephone
Please describe business relationship, years known	Please describe business relationship, years known

Name	Name
Company	Company
Telephone	Telephone
Please describe business relationship, years known	Please describe business relationship, years known

EDUCATION

Education	Name & Address	Major	Degree/Certificate
High School			
Community College/Trade School			
College/University			
Graduate School			

List other completed classes, academic honors, additional skills or training which may be applicable to your employment at this Company:

LANGUAGES

Language	Specific Skill Level P = Poor F = Fair G = Good E = Excellent			
English	Write	Read	Speak	Studied
Spanish	Write	Read	Speak	Studied
	Write	Read	Speak	Studied

COMPUTER / OFFICE SKILLS (if applicable)

Please enter proficiency level		1=Expert	2=Intermediate	3=Novice	4=Never Used
_____ Spreadsheets	_____ Word Processing	_____ Data Management	_____ Internet Explorer	_____ Project Management	_____ MS Outlook
List other hardware/software you can operate:					
_____ WPM	_____ Dictaphone	_____ 10-Key	_____ Fast Notes/Shorthand:	_____ WPM	List-other office skills:

Affirmative Action Employment Questionnaire

Applicant: Please complete this form and submit it with your application. The form will be detached from your application and will be kept separate and confidential. This information is being gathered for the purpose of evaluating the effectiveness of Affirmative Action procedures, which this Agency uses to recruit applicants and measure their qualifications. The information will NOT be used in any way to make any employment decision which affects you. This information is an integral part of the Agency's Affirmative Action Program and is necessary to ensure equal opportunities for all. In addition, the collection of ethnic data to ensure equality is required by law.

Position applied for: _____ **Date:** _____

I first learned of this job opening through (check one):

- 1. _____ a friend or relative
- 2. _____ an organization or group (please specify): _____
- 3. _____ a newspaper advertisement. Which newspaper? _____
- 4. _____ an outreach recruiter
- 5. _____ other means (please specify): _____

PERSONAL DATA FOR AFFIRMATIVE ACTION PURPOSES ONLY

Sex (check one) _____ Female _____ Male

Age (check one) - _____ under 20 _____ 20-30 _____ 31-39 _____ 40-59 _____ 60 or older

Ethnic Data

_____ Black- African-American

_____ Hispanic (includes all persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race, other than Europeans)

_____ American Indian/Native American/Alaskan Natives

_____ White (not of Hispanic origin)

_____ Two or more races, not Hispanic or Latino

_____ Asian, not Hispanic or Latino

_____ Native Hawaiian or Other Pacific Islander, not Hispanic or Latino

_____ Other

Veteran Status

_____ Disabled Veteran

_____ Vietnam Era Veteran

Are you disabled?

_____ Hearing (5% or more loss in both ears)

_____ Speech

_____ Sight (use of eyeglasses which permit normal vision is excluded)

_____ Impairment due to amputation, loss of functions or coordination

_____ Other

CERTIFICATION

I certify that the information provided by me on this Application, accompanying resume, or any attachments that I have supplied, is true, correct and complete to the best of my knowledge and that any misrepresentation, omission, falsification or failure to disclose pertinent information will be cause for dismissal if hired.

I authorize, consent and hold harmless my current and prior employers, educational institutions and persons or organizations named in this Application (or accompanying Resume) to release any information to Community Bridges that may be required to make an employment decision. This authorization will serve as a release of any and all information and for this purpose; a photocopy shall be considered an original and valid.

I understand and agree that this Application is not a contract and that any acceptance of employment is not a contract of employment for a definite term. I understand that the Application will remain active for six (6) months. After that time, if I desire further consideration by Community Bridges, I will renew my Application in writing or in person.

Applicant's Full Signature: _____ Date: _____

Please indicate if you will need any of the following in order to participate in an oral interview.
Favor de indicar si usted necesita alguno de los siguientes servicios para poder participar en una entrevista verbal.

_____ English/Spanish Translator
_____ Intérprete Ingles/Español

_____ An interview location that is wheelchair accessible

_____ An interview location that does not require the climbing of stairs

_____ Other _____
