



Ventura County Office of Education  
 5189 Verdugo Way  
 Camarillo, California 93012  
 (805) 383-1913 or (805) 383-1911

## Application for Classified Employment

**INSTRUCTIONS:** Print in ink or type. Complete all sections. Incomplete or unreadable applications will be disqualification from the application process. Please submit **one application for each position.**

Print the exact title of the position you are applying for:

Name: (Last)		(First)	(Middle)	Social Security Number:	
Street Address or P.O. Box			City	State	Zip Code
Home Phone Number	E-Mail Address		Work Phone Number	Cell Phone Number	

**EDUCATION/TRAINING:** Did you graduate from high school?      Yes      No  
 GED?      Yes      No If not, highest grade completed?             
 Please list training and education important to this job.

School/Training Center	Class Name/Program	Degree/Certificate	Mo./Yr. Attended

**ADDITIONAL INFORMATION:** Please indicate any that may apply.

Languages	Speak	Read	Write
SPANISH	_____	_____	_____
SIGN LANGUAGE	_____	_____	_____
OTHER: _____	_____	_____	_____
Are you interested in temporary work?	YES	NO	

Licenses/Certificates		
CA Drivers License:	License Number:	Expiration Date:
Other:		
Please Specify:		

Are you currently or have you ever been employed by VCOE? If yes, please complete:

Job Title: \_\_\_\_\_ Dates: \_\_\_\_\_ Location: \_\_\_\_\_

Status: \_\_\_\_\_ Permanent: \_\_\_\_\_ Temporary \_\_\_\_\_ Other: \_\_\_\_\_

**Additional information:** Please list any of the following that apply.

Knowledge of machines or equipment: \_\_\_\_\_

Computer or software skills: \_\_\_\_\_

Other skills related to this position: \_\_\_\_\_

The Ventura County Office of Education is committed to equal opportunities for all individuals in education. District programs, activities, and employment shall be free from discrimination based on sex, race, color, religion, national origin, ethnic group, sexual orientation, marital or parental status, physical or mental disability, Section 504 disability or an other unlawful consideration.

**Employment Information:** Read the *MINIMUM QUALIFICATION* requirements in the recruitment brochure before completing this section. **Begin with your present or most recent experience.** List any pertinent experience you believe qualifies you for the position. Completion of this section is very important as this may be used as a reference during the examination process. If additional space is needed, attach supplemental sheets. Please provide an explanation for any gaps in your employment history. **(Do not write "See Resume" in lieu of filling out our form completely. Resumes may be attached to provide additional information not requested below.)**

Employment Dates: Month/Year From _____ To _____	Title of Present or Most Recent Position:	Company Name and Employer/Supervisor:
Salary History: Starting: _____ Final: _____	Describe your duties:	Address:
Hours Worked per Week: _____		City _____ State _____ Zip _____
Reason for Leaving:		Area Code - Phone Number _____
Employment Dates: Month/Year From _____ To _____	Title of Present or Most Recent Position:	Employer/Supervisor:
Salary History: Starting: _____ Final: _____	Describe your duties:	Address:
Hours Worked per Week: _____		City _____ State _____ Zip _____
Reason for Leaving:		Area Code - Phone Number _____
Employment Dates: Month/Year From _____ To _____	Title of Present or Most Recent Position:	Employer/Supervisor:
Salary History: Starting: _____ Final: _____	Describe your duties:	Address:
Hours Worked per Week: _____		City _____ State _____ Zip _____
Reason for Leaving:		Area Code - Phone Number _____
Employment Dates: Month/Year From _____ To _____	Title of Present or Most Recent Position:	Employer/Supervisor:
Salary History: Starting: _____ Final: _____	Describe your duties:	Address:
Hours Worked per Week: _____		City _____ State _____ Zip _____
Reason for Leaving:		Area Code - Phone Number _____

MAY WE CONTACT YOUR PRESENT EMPLOYER AT THIS TIME? Yes \_\_\_ No \_\_\_

Do you have any physical or mental handicap/disability which may limit your ability to perform the essential functions of the job for which you have applied? ρ Yes ρ No (If yes, please explain on the reverse side and indicate what accommodations you would need to perform these functions.)

PLEASE READ CAREFULLY AND SIGN: I certify the statements herein are true to the best of my knowledge and understand that any misstatements of material facts contained in this application will be cause for rejection of the application, removal of my name from the eligibility list, or discharge from the Ventura County Superintendent of Schools Office. Prior to an offer of employment, I give the Ventura County Office of Education authorization to contact my current and previous employers.

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

Per the immigration Reform and Control Act of 1986, you must provide us with proper documentation of your legal right to work in the United States as a condition of employment.  
**VCOE is an Equal Opportunity Employer**

**VENTURA COUNTY OFFICE OF EDUCATION**

Human Resources Department  
5189 Verdugo Way  
Camarillo, California 93012

**CONVICTION REPORT**

**All applicants MUST complete this form even if applicant has had no convictions.**

As a part of the recruitment process, you will be required to complete a separate form to report any record of conviction other than a minor traffic violation. Such a record does not necessarily exclude you from employment with this office. Misinformation or failure to provide requested information may result in your being disqualified from consideration for employment.

Print the exact title of the position you are applying for:

Name: (Last)		(First)	(Middle)	Social Security Number:	
Street Address or P.O. Box			City	State	Zip Code
Home Phone Number		E-Mail Address	Work Phone Number	Cell Phone Number	

If you have a record of convictions for any offenses other than minor traffic violations, it is required that you disclose the information at this time. A conviction record is not an automatic bar to employment; persons with conviction records may be employed. Each case is decided on its individual merit and conviction record. Each employee is required to be fingerprinted as a condition of employment. Employees **will not** be able to begin their assignment until fingerprint clearance has been received by Human Resources. Falsification of this form or omission of any convictions may result in your application being disqualified.

**This information will be kept confidential and separate from your job application.**

CONVICTION RECORD

Have you ever been **convicted** of a sex offense or narcotics offense?  Yes  No If so, when? \_\_\_\_\_  
Offense? \_\_\_\_\_ Code and Section Number violated (if known): \_\_\_\_\_

Have you been convicted of a misdemeanor or felony which resulted in imprisonment, or are you currently out on bail pending trial for an arrest?  Yes  No If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

If the answer is "YES" to any question above list all such cases below. Give (1) the charge or nature of offense; (2) the dates offense occurred; (3) the disposition of the penalty imposed.

Charges(s)	Dates	Disposition

I certify and declare under penalty of perjury that the foregoing is true and correct.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

ANY MISREPRESENTATION OF FACTS CONTAINED ON THIS APPLICATION IS CAUSE FOR REJECTION OF APPLICATION, REMOVAL FROM THE ELIGIBILITY LIST, OR DISMISSAL.

**VENTURA COUNTY OFFICE OF EDUCATION**

Human Resources Department  
5189 Verdugo Way  
Camarillo, California 93012

**CLASSIFIED APPLICANT INFORMATION**

The optional information requested is kept for statistical purposes only. This information will not affect the selection process. For prompt processing of your application, please complete this form and return it with your application.

Print the exact title of the position you are applying for:
---

Name: (Last)		(First)	(Middle)	Social Security Number:	
Street Address or P.O. Box			City	State	Zip Code
Home Phone Number	E-Mail Address		Work Phone Number	Cell Phone Number	

**CHECK THE ONE BOX THAT BEST DESCRIBES YOUR ANSWER FOR EACH GROUP.**

<b>How did you hear about the position?</b>	
<input type="checkbox"/> Job Notice	<input type="checkbox"/> Newspaper Ad
<input type="checkbox"/> Visit to the Human Resources Office	<input type="checkbox"/> Specify: _____
<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Private Employment Agency
<input type="checkbox"/> EDD State of California	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Web Site	<input type="checkbox"/> Job Hotline

<b>Please check one:</b>	
<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> Asian or Pacific Islander
<input type="checkbox"/> White	<input type="checkbox"/> Filipino-American
<input type="checkbox"/> Hispanic	<input type="checkbox"/> Black
	<input type="checkbox"/> Other: _____

<b>Education:</b>	
<input type="checkbox"/> Less than 12 <sup>th</sup> grade	<input type="checkbox"/> Years of college - no degree
<input type="checkbox"/> 12 <sup>th</sup> grade	<input type="checkbox"/> Bachelor Degree
	<input type="checkbox"/> Graduate Degree

<b>Other information:</b>		
Date of Birth _____	Gender:	Physically Handicapped:
	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Yes <input type="checkbox"/> No
		Require Accommodation:
		<input type="checkbox"/> Yes <input type="checkbox"/> No

I understand that this information is to be used for statistical purposes only and will not affect the selection process. I certify that the above information is true to the best of my knowledge.

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