



Thank you for expressing interest in joining the City of Lemoore.
Instructions for completing the City of Lemoore Employment
Application appear below for your convenience.

1. Use the tab key to navigate through the form.
2. Use the space bar or the mouse to check the appropriate boxes.
3. If the information you are entering does not fit, please abbreviate or use a separate sheet of paper.
4. Sign the application in ink or electronically.
5. Mail your employment application to:
City of Lemoore
Human Resources Department
119 Fox Street
Lemoore, CA 93245

Email:

humanresources@lemoore.com

Fax:

(559) 924-9003

- Applications must be received by the Human Resources Department as indicated in the recruitment notice. Recruitment notices are available on our website at www.lemoore.com
- Supplemental information, if required, must be completed and returned with your Employment Application.
- A résumé may be provided with your completed City of Lemoore Employment Application (but is not accepted in lieu of an Application).
- The Voluntary Applicant Self Identification Report located on the last page is **optional** and is part of our Equal Employment Opportunity/Diversity Program. Completion of this section is **voluntary** and is **NOT** part of the selection process. It will be detached from your application and will be used for statistical purposes only.
- To claim Veteran's Preference, complete the Veteran's Preference Application on the last page and submit a certified DD-214 copy prior the final filing date.



City of Lemoore
 HUMAN RESOURCES DEPARTMENT
 119 Fox Street
 Lemoore, CA 93245
 Phone (559) 924-6700
 www.lemoore.com

EMPLOYMENT APPLICATION FOR THE POSITION OF:

APPLICANT INSTRUCTIONS: A separate application is required for each position for which you are applying. Applications should be typed or printed. Incomplete or illegible applications may not be considered.

PERSONAL DATA

Name (Last)	(First)	(Middle)	Area Code	Home Telephone
Home Address (Number and Street)			Area Code	Work Telephone
Apt #			Area Code	Cell/Mobile Phone
(City, State & Zip)			Email Address	
Do you have a valid Driver's License? YES NO			Are you at least 18 years of age? YES NO	
State: Number: Class: Expiration Date:			If no, can you submit a valid work permit? YES NO	
Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodations?				YES NO

EDUCATION AND TRAINING (Attach additional sheets if necessary)

Name and Location of Last Grade or High School Attended	Indicate Highest Grade Completed (1-12)			Did you graduate?		Do you have a GED Certificate?	
				YES	NO	YES	NO
Name and location of Colleges, Universities, Business or Trade Schools Attended	Number of Units Completed	Sem	Qtr	Major Subjects		Title of Degree or Certificate	Dates Received or Expected
Please describe additional course work or training (including military) which would qualify you for this position.							
Please list certificates or licenses of professional or vocational competence you possess which relate to this position.							
Please describe any pertinent skills you have such as typing, shorthand, computer (hardware and software), machine or equipment operation, or foreign language skills.							
U.S. Armed Forces							
Branch of Service:		Years of Active Duty:			Date of Separation from Active Duty:		

A. Have you ever been employed by the City of Lemoore? YES NO From _____ To _____ Department _____

B. Are you related to anyone currently employed by the City of Lemoore? YES NO Name _____ Department _____

REFERENCES Provide names and addresses of three professional references, who have knowledge of your character, work experience, and ability.

Name	Address	Business/Occupation	Phone Number
1.			
2.			
3.			

AN EQUAL OPPORTUNITY EMPLOYER

EXPERIENCE: List all jobs you have held in the last ten years beginning with the most recent job including pertinent military service and volunteer work. List each promotion as a separate job. If additional space is needed, attach additional sheets. A resume is not a substitute for completing the application.

MAY WE CONTACT YOUR PRESENT EMPLOYER? (Check One) Not Applicable YES NO

From: _____	To: _____	Name of Employer: _____	Position Title: _____
Mo. Yr.	Mo. Yr.	Duties Performed: _____	
Address of Employer: _____			
Name of Supervisor: _____			
Phone Number: _____			
Reason for Leaving: _____		Hours per Week: _____	Salary \$ _____ Per Month _____

From: _____	To: _____	Name of Employer: _____	Position Title: _____
Mo. Yr.	Mo. Yr.	Duties Performed: _____	
Address of Employer: _____			
Name of Supervisor: _____			
Phone Number: _____			
Reason for Leaving: _____		Hours per Week: _____	Salary \$ _____ Per Month _____

From: _____	To: _____	Name of Employer: _____	Position Title: _____
Mo. Yr.	Mo. Yr.	Duties Performed: _____	
Address of Employer: _____			
Name of Supervisor: _____			
Phone Number: _____			
Reason for Leaving: _____		Hours per Week: _____	Salary \$ _____ Per Month _____

From: _____	To: _____	Name of Employer: _____	Position Title: _____
Mo. Yr.	Mo. Yr.	Duties Performed: _____	
Address of Employer: _____			
Name of Supervisor: _____			
Phone Number: _____			
Reason for Leaving: _____		Hours per Week: _____	Salary \$ _____ Per Month _____

From: _____	To: _____	Name of Employer: _____	Position Title: _____
Mo. Yr.	Mo. Yr.	Duties Performed: _____	
Address of Employer: _____			
Name of Supervisor: _____			
Phone Number: _____			
Reason for Leaving: _____		Hours per Week: _____	Salary \$ _____ Per Month _____

CERTIFICATE OF APPLICANT – READ CAREFULLY

I certify that all statements contained herein or submitted to the City of Lemoore as part of this application are true, and I agree and understand that any misrepresentation or omission of facts contained in any material submitted as part of the employment process is cause for dismissal. I authorize a full background investigation to verify statements I have made and herein to be conducted by the City, and authorize all former employers listed above to release employment information to the City. I further agree to submit to a medical examination as part of the appointment process.

Signature: _____ Date: _____



CITY OF LEMOORE APPLICANT DATA FORM

In order for the City of Lemoore to evaluate applicant flow patterns as part of our Equal Employment Opportunity/Diversity Program, we would appreciate your *voluntary* cooperation in providing the following information. **THIS INFORMATION IS NOT PART OF THE SELECTION PROCESS.** It will be detached from your application and will be used for statistical purposes only.

Name: _____

Position Applied for: _____

Ethnic Background (Please check one):

WHITE (not of Hispanic origin): All persons having origins in any of the peoples of Europe, North Africa or the Middle East.

BLACK (not of Hispanic origin): All persons having origins in any of the Black racial groups of Africa.

HISPANIC: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture of origin, regardless of race.

ASIAN or PACIFIC ISLANDER: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

AMERICAN INDIAN or ALASKAN NATIVE: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

GENDER (Please check one): Male Female

Please check all that apply: Under 18 18-39 40 and over Individual with a Disability

How did you learn about this job opening?

Fresno Bee	Job Announcement at City Hall	From a friend or relative
Visalia Times Delta	Jobs Available	From a City employee
JTO	The Hanford Sentinel	
EDD	Other City Hall (specify below)	Other (specify below)
University/College/School Board	Other Web Site (specify below)	

Specify information here: _____



City of Lemoore

119 Fox Street
Lemoore • CA 93245
Phone • (559) 924-6700
FAX • (559) 924-9003

VETERAN’S PREFERENCE APPLICATION

1. For the purposes of this section, a “veteran” is one who has served on active-duty in the United States Armed Forces for period of at least 91 continuous days and who has received an honorable discharge from active duty. The definition of the term "veteran" as used in this rule shall not include reserve or other inactive service.

2. Military veterans shall be given “preference in initial appointment to City service”, in accordance with this rule. To receive veteran’s preference, the veteran must meet the minimum qualifications established for entrance to the examination, and must attain a passing score in each phase of the examination. Veteran’s preference is allowed only on initial entrance into City service. The exercise of said veteran’s preference shall be exhausted upon appointment to a regular position from an eligibility list. The application of veteran’s preference on any other recruitment shall be canceled.

3. Applicants who receive a final passing score on an open recruitment and who are veterans, shall be eligible to receive an additional five points which will be added to their final examination score for ranking purposes only. The passing score of veteran shall be annotated to indicate that the veteran’s score shall be increased by five points solely for the purpose of determining the rank in the eligibility listing.

4. To claim veteran’s preference, an applicant must apply in the space provided on the application form and submit a certified copy of their most recent form, (DD-214), or equivalent document acceptable to Human Resources, as evidence of military service on or before the final filing date for the recruitment. Veteran’s preference must be established separately for each recruitment. Failure to request veteran’s preference on the application or to submit the required credentials (DD-214) prior to the final filing date for the recruitment will be deemed a waiver of veteran’s preference.

5. Veterans who are in the process of separation from military service may file a written statement showing the anticipated date of discharge and certifying the discharge is for honorable reasons. Such statements must be filed no later than the final filing date for the recruitment. The veteran in the process of being discharged shall be entitled to veteran’s preference pursuant to this rule only if a certified copy of form DD-214 or other satisfactory proof of discharge is filed with the human resources division prior to the date of certification for appointment. If such proof is not filed before the certification date, the veteran’s position on the eligible list for certification purposes shall be determined on the basis of their scores on the examination without the additional preference points. Veteran’s documents submitted after the certification date will not be accepted.

I, _____, request Veteran’s Preference during the selection process
for the position of _____.

Applicant’s Signature

(date)