



# Colusa County Office of Education

*Kay C. Spurgeon, Superintendent*

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Colusa, CA 95932  
(530) 458-0350  
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www.ccoe.net

## APPLICATION FOR CLASSIFIED EMPLOYMENT

*Any offer of employment is subject to a criminal history check and any person will be barred from employment if he or she has a prior conviction for a serious or violent felony as specified, refer to Penal Code Sections 1192.7 and 667.5 (unless the applicant has obtained a certificate of rehabilitation and pardon, or if for a serious felony, a court finding of rehabilitation). Prospective employees will be given consideration for all positions without regard to race, color, religion, ancestry, national origin, age, sex, marital or veteran status, or non job-related medical conditions or physical handicaps.*

<b>Date:</b>	<b>Position Applying For:</b>
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### PERSONAL

Last Name	First Name	MI
All Former Names		
Street Address		P.O. Box
City, State, Zip		Home Phone
Valid California Driver's License <input type="checkbox"/> YES <input type="checkbox"/> NO	E-Mail Address	Cell Phone

What type of work are you available for?     FULL TIME     PART TIME     SUBSTITUTE

Have you ever worked for the Colusa County Office of Education?     YES     NO

Do you have any relatives who work for the Colusa County Office of Education?     YES     NO

If employed, could you furnish verification of your legal right to work in the U.S.?     YES     NO

How did you hear about this position?

### EDUCATION

High School	City, State	Year of Graduation or	Year of GED
Colleges/Universities	City, State	Major/Degree	Graduation Date
Vocational/Business/Trade/ Correspondence Schools	City, State	Subject/Certification	Graduation Date

**EMPLOYMENT HISTORY** — List all employment (full and part-time) for the past 10 years. List your present or most recent employment first. If additional space is needed, please add a separate sheet. This section **MUST BE COMPLETED IN FULL** even if you attach a resume or other employment history information.

From \_\_\_\_\_ To \_\_\_\_\_  
 Month Year Month Year Title of Your Position

\_\_\_\_\_  
 Employer's Name Duties

\_\_\_\_\_  
 Employer's Address

\_\_\_\_\_  
 Name of Your Supervisor Salary \$ \_\_\_\_\_ May We Contact This Employer?  
 Hourly / Monthly / Annual (circle one)  YES  NO

( \_\_\_\_\_ )  
 Telephone Number of Your Supervisor Reason For Leaving

From \_\_\_\_\_ To \_\_\_\_\_  
 Month Year Month Year Title of Your Position

\_\_\_\_\_  
 Employer's Name Duties

\_\_\_\_\_  
 Employer's Address

\_\_\_\_\_  
 Name of Your Supervisor Salary \$ \_\_\_\_\_ May We Contact This Employer?  
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 Employer's Address

\_\_\_\_\_  
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( \_\_\_\_\_ )  
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**SKILLS**

<input type="checkbox"/> Computer, List Programs:	
<input type="checkbox"/> Internet	<input type="checkbox"/> 10-Kay Calculator
<input type="checkbox"/> Keyboard - Speed (WPM):	<input type="checkbox"/> Copy Machine
<input type="checkbox"/> Typewriter - Speed (WPM):	<input type="checkbox"/> Other
<input type="checkbox"/> Multi-line Telephone System	

<b>EXPERIENCE</b>	<b>Years</b>	<b>Years</b>
<input type="checkbox"/> Accounting		<input type="checkbox"/> Maintenance
<input type="checkbox"/> Secretarial/Clerical/Reception		<input type="checkbox"/> Custodial
<input type="checkbox"/> Data Processing		<input type="checkbox"/> Groundskeeper
<input type="checkbox"/> Paraeducator		<input type="checkbox"/> Supervisor
<input type="checkbox"/> Personnel		<input type="checkbox"/> Other
<input type="checkbox"/> Technology		

**GENERAL INFORMATION**

Languages Other Than English:

Speak  Read  Write Language: \_\_\_\_\_

Speak  Read  Write Language: \_\_\_\_\_

If applicable to this position, have you passed the Paraeducator Proficiency Test (CODESP)?  YES  NO  N/A  
(If **YES**, please include a copy of your certificate.)

Do you have any physical condition which may limit your ability to perform the job for which you have applied?  
 YES  NO (If **YES**, how can we accommodate?)

**SPECIAL SKILLS** (Summarize special job-related skills and qualifications acquired from employment or other experience)


**MILITARY EXPERIENCE** (Complete this section if you served in the U.S. Armed Forces) **BRANCH OF SERVICE?:**


**MISCELLANEOUS:**

Have you been dismissed or asked to resign from any position?  YES  NO (If **YES**, please explain.)

Are any criminal charges or proceedings pending against you?  YES  NO (If **YES**, please explain.)

Have you ever been convicted of any misdemeanor or felony?  YES  NO (If **YES**, please explain when, where, and disposition of case(s). **NOTE:** A conviction may not necessarily disqualify you from the job for which you have applied.)


**REFERENCES** Please use PROFESSIONAL references other than those supervisors listed on the employment section of this application.

NAME OF REFERENCE	RELATIONSHIP	HOW LONG ASSOCIATED?	PHONE NUMBER

My signature below authorizes the Colusa County Office of Education to conduct a background investigation and authorizes release of all information in connection with my application for employment. Further, I hold harmless any individual or firm for any information that they may provide in this investigation which may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation, hereby release the Colusa County Office of Education and the reference source from any and all liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: law enforcement agencies and any locality to which they may refer for release of information pertaining to any finds of child abuse or neglect investigations involving me.

Furthermore, I certify that I have made true, correct, and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission or false answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the Colusa County Office of Education.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain my original written signature.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Print Name: \_\_\_\_\_

**IMPORTANT INFORMATION - PLEASE READ:**  
 All applicants will be required to submit a separate application for each position they are applying for. Therefore, it is our recommendation that you make and keep a copy of this application prior to submitting it to our office in the event you are interested in applying for another position. We will accept a copy of the application as long as it has an "original" signature.

**COLUSA COUNTY OFFICE OF EDUCATION IN AN  
 AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER**