



Parks and Recreation Department
 3300 Capitol Avenue, Bldg. B, P.O. Box 5006
 Fremont CA 94537-5006
 Phone: (510) 494-4300
 www.fremont.gov

For Office Use Only

Recreation Application for Part-Time Temporary Employment

- An electronic version of this form is available on the City's website. Once you have completed the form, you can mail it to Parks and Recreation at the address above. Otherwise, please print clearly using black or blue ink.
- Check the job announcement to see if a resume or a supplemental questionnaire is required.
- Notify the Parks and Recreation Department, if you require reasonable accommodation in the testing process.
- If you have difficulty completing this application, please contact the Parks and Recreation Department.

Position Desired (Please list all positions of interest, in order of preference)

Position Desired (give exact title):

List all positions you are applying for concurrently:

Personal Information (Please notify us of any change of address or phone number.)

Last Name: _____ First Name: _____

Street Address: _____ Apt. No.: _____

City: _____ State/Zip: _____

Home Phone: () Alternate Phone: () Work Phone: ()

Email Address: _____

Do you currently possess a valid CA Driver's License? Yes No Class: _____

Do you meet the minimum age requirement as indicated on the job announcement? Yes No

If hired, can you provide evidence of your legal right to work in the USA? Yes No

Do you have any relatives employed by the City of Fremont? Yes No

Have you ever previously applied for work with, or been employed by, the City of Fremont? Yes No

If yes, when and for/in what position?

Are you able to perform the essential functions of the job for which you are applying, either with or without accommodation? Yes No

If no, please describe the functions which you cannot perform:

The City of Fremont complies with the Fair Employment and Housing Act (FEHA) and all other disability laws. We will consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions, unless accommodation would cause undue hardship.

Time Available	Sun	Mon	Tue	Wed	Thur	Fri	Sat

- Seasonal
 Year Around

Education & Training

Education: Circle highest grade completed or will complete in next 4 months: 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20

Name of School	Location	Did you graduate?
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High School: _____ Yes No GED or equivalent

Name of School	Location	Degree/Major	Units Completed
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College/University: _____

Trade/Business School: _____

The City of Fremont is an Equal Opportunity Employer

Name of Applicant:

Position Desired:

Qualifications, Skills, Certificates & Licenses (Attach additional pages, if needed)

Describe your experience in working or volunteering with groups in a recreational setting (i.e., Community Centers, Camps, After-School Programs, Social Clubs, etc.).

Describe fully any job-related skills, knowledge, special training, certificates or licenses you may possess.

Do you have any foreign language skills which may be applicable to the position for which you are applying? Yes No
If yes, indicate what language(s), and for each whether you can (1) speak, (2) read, and (3) write in that language:

Software Applications:

Typing WPM:

List any award(s), publication(s), qualifications for the position, etc. which are not listed in another area of the application.

Experience

List your most recent experience first (job/volunteer/U.S. military) for all experience during the last 10 years. List each change in title or promotion separately. Attach additional pages if needed. You may attach your resume or job-related certificates. **A resume is not a substitute for completing this section of the application.**

Name of Employer:

Job Title:

Supervisor's Name:

Supervisor's Phone: ()

Street Address:

City:

State/Zip:

From (Mo./Yr.):

To (Mo./Yr.):

Hours per week:

Salary:

Duties Performed:

Reason for Leaving:

Experience (continued)

Name of Employer:

Job Title:

Supervisor's Name:

Supervisor's Phone: ()

Street Address:

City:

State/Zip:

From (Mo./Yr.):

To (Mo./Yr.):

Hours per week:

Salary:

Duties Performed:

Reason for Leaving:

Name of Applicant: _____ Position Desired: _____

Experience (continued)

Name of Employer: _____ Job Title: _____

Supervisor's Name: _____ Supervisor's Phone: () _____

Street Address: _____ City: _____ State/Zip: _____

From (Mo./Yr.): _____ To (Mo./Yr.): _____ Hours per week: _____ Salary: _____

Duties Performed: _____

Reason for Leaving: _____

Experience (continued)

Name of Employer: _____ Job Title: _____

Supervisor's Name: _____ Supervisor's Phone: () _____

Street Address: _____ City: _____ State/Zip: _____

From (Mo./Yr.): _____ To (Mo./Yr.): _____ Hours per week: _____ Salary: _____

Duties Performed: _____

Reason for Leaving: _____

Experience (continued)

Name of Employer: _____ Job Title: _____

Supervisor's Name: _____ Supervisor's Phone: () _____

Street Address: _____ City: _____ State/Zip: _____

From (Mo./Yr.): _____ To (Mo./Yr.): _____ Hours per week: _____ Salary: _____

Duties Performed: _____

Reason for Leaving: _____

Name of Applicant: _____

Position Desired: _____

May we contact your present employer regarding your qualifications and work record? Yes No

May we contact your past employers regarding your qualifications and work record? Yes No

Have you ever been terminated, other than layoff, or forced to resign or rejected during probation from employment within the last 10 years? If so, please give name of employer, dates of employment and reasons below. If no, indicate "not applicable."

Conviction

Have you ever been convicted of a felony or misdemeanor? A "conviction" is any plea, verdict or finding of guilt regardless of whether or not a court imposed a sentence. You may exclude any conviction for marijuana-related offenses, if over two years old. Please list all convictions since age 18, excluding minor traffic violations and convictions that have been sealed, expunged, or eradicated. Convictions do not automatically disqualify you. The nature of the offense, the date of the offense, the surrounding circumstances, and the relevance of the offense to the position sought may be considered. If not, indicate "not applicable." A fingerprint check will be made of all new hires.

Agreement

Agreement of Applicant: I certify that the statements in this application and accompanying materials are true, complete and correct to the best of my knowledge, and understand that misrepresentation or deliberate omission of fact may subject me to disqualification or dismissal. I agree to be fingerprinted, to sign an oath of office, and to furnish proof of education and citizenship or legal right to work in this country as may be required as a condition of employment.

Signature

Date

Submit your completed application to:

Parks and Recreation Department • City of Fremont • 3300 Capitol Avenue • Building B • P.O. Box 5006 • Fremont, CA 94537-5006

Recruitment Questionnaire

I first learned about this employment opportunity through:

- A City employee (specify employee name): _____
- Friend or relative
- The City's Job Hotline
- The Employment page on the City's website
- The City of Fremont Human Resources Department
- Another job page on the internet (specify website): _____
- Flyer
- Ad (specify): _____
- Other (specify): _____

- Job fair
 - College, specify _____
 - High School, specify _____
 - Hilton Job Fair, specify which high school _____
- Career center
 - College, specify _____
 - High School, specify _____
 - Mission Valley ROP

Employment Questionnaire

Please respond to the following questions and submit this form with your application packet. The completed form is confidential and will be detached from your application. This information is voluntary and is gathered in accordance with State and Federal laws.

Check one:

- Female
- Male

Check one:

- American Indian or Alaskan Native – All persons having origins in any of the original peoples of North and South America (including Central America) and who maintain cultural identification through tribal affiliation or community recognition.
Tribal affiliation: _____
 - Asian – All persons 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, Thailand, and Vietnam.
 - Black – When not of Hispanic origin, all persons having origins in any of the Black racial groups of Africa.
 - Filipino – All persons having origins in any of the original peoples of the Philippine Islands.
 - Hawaiian Native or Other Pacific Islander – All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
 - Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
 - White – When not of Hispanic origin, all persons having origins in any of the original peoples of Europe, the Middle East or North Africa.
 - Other (specify): _____
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