EMPLOYEE INFORMATION SHEET

COUNTY OF LOS ANGELES

1. *Last Name*	*First Name*	*Middle Name*	2. *Social Security Number*

3. RESIDENCE – *Street and Number*	*City, State and Zip Code*	4. DO YOU HAVE A RELATIVE CURRENTLY EMPLOYED BY THE COUNTY OF LOS ANGELES ☐ YES ☐ NO
5. *Since (Date)*	*Telephone*	
6. *In Emergency Notify*	*Telephone Number*	*Indicate Name, Relationship and Department below*
Street and Number	*City, State*	Name / Relationship / Department
7. MILITARY SERVICE IN THE ARMED FORCES OF THE UNITED STATES	*From* / *To* / *Serial Number*	
Highest Rank or Rating	*Branch* / *Type of Discharge*	

8. INDICATE COMPUTER SOFTWARE PROGRAMS PROFICIENCY						
9. LIST HEAVY EQUIPMENT YOU CAN OPERATE						

10. IF THE POSITION FOR WHICH YOU ARE APPLYING REQUIRES OPERATING A VEHICLE ON THE JOB, PLEASE FURNISH	*California Drivers License*	*Expiration Date*

11. FOREIGN LANGUAGES	*CHECK* Read	Write	Speak	12. *EDUCATION (High School or Higher) Name and Location of School*	*Last Grade Completed*	*Date Completed*	*College Major*	*Degrees*
Spanish								
French								
Other								

13. PROFESSIONAL OR TECHNICAL LICENSES, PERMITS, ETC. (SHOW STATE, COUNTY OR CITY IN WHICH REGISTERED):

14. HAVE YOU, AS A JUVENILE OR ADULT, EVER BEEN CONVICTED, FINED, IMPRISONED, OR PLACED ON PROBATION OR A SUSPENDED SENTENCE, OR HAVE YOU FORFEITED BAIL IN CONNECTION WITH ANY OFFENSE (EXCEPT FOR TRAFFIC TICKETS INVOLVING FAULTY EQUIPMENT, PARKING, HAND OR TRAFFIC SIGNALS OR SPEEDING) IN ANY CIVIL OR MILITARY COURT OF LAW? (Include convictions dismissed under penal code 1203.4 and any major traffic offenses resulting in warrants).

☐ YES ☐ NO If "yes" give the following information for each offense:

AGE AT TIME OF ACTION	DATE	POLICE DEPARTMENT OR COURT	CHARGE	DISPOSITION

15. HAVE YOU WORKED FOR LOS ANGELES COUNTY UNDER A DIFFERENT NAME? If so, please list:

16. HAVE YOU EVER BEEN CONVICTED OF A CRIME UNDER A DIFFERENT NAME? If so, please list:

17. I AM WILLING TO WORK THE FOLLOWING SHIFT(S). ☐ Day Shift ☐ Night Shift ☐ Swing Shift ☐ Weekend Shift

18. REMARKS (Identify by Box Number)

If you are selected for this position and are not a citizen, you will be required to submit an alien registration card.

PLEASE TYPEWRITE OR PRINT IN INK

19. EMPLOYMENT HISTORY

Begin with present or last experience. Account for past ten years or past ten employers. (Include school, part-time and temporary positions, as well as periods of unemployment)

From Mo – Yr	To Mo – Yr	Time In Mos.	Position or Occupation	Duties Performed in Each Employment	Wages or Salary	Name and Address of All Former Employers including Other County Departments, as well as Private Firms	Reason for Leaving *

*IF DISCHARGED, GIVE DETAILS –

1. ALL STATEMENTS MADE HEREIN BY ME ARE TRUE TO THE BEST OF MY KNOWLEDGE.

Date _____ Signature of Applicant _____

21. THIS SPACE FOR USE BY INTERVIEWER

INTERVIEWED BY -

SIGNATURE TITLE DEPARTMENT DATE