

The Butte County Association of Governments is an equal opportunity employer and considers applicants for all positions without regard to race, color, religious creed, national origin, ancestry, age, gender, medical condition, disability, genetic information, sexual orientation, marital status, military or veteran's status, or any other category protected under federal or state law, in accordance with all applicable laws and regulations. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## Personal Information

Name \_\_\_\_\_

Address _____	City _____	State _____	Zip _____
Phone number _____	Email address _____		
Are you legally eligible to work in the US? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you a veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Have you ever been convicted of a crime within the last 7 years? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain (a conviction will not automatically bar employment): _____			
How were you referred to us? _____			
If selected for employment are you willing to submit to a background check? Yes <input type="checkbox"/> No <input type="checkbox"/>			

## Position

Position you are applying for _____	Available start date _____	Desired pay _____
Employment desired <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Seasonal/Temporary		

## Education/Training

School name	Location	Years attended	Degree received or units completed	Major or Program type

## Professional License, Registration, Certification

License, Registration, or Certificate	Number	Date Received	Expiration Date	Licensing Agency

## Skills *(This section is voluntary unless states as a requirement in the Job Announcement.)*

Other than English, do you possess language skills that you could use in your work? Yes  No

If yes, what languages do you speak fluently?

If yes, what languages do you write fluently?

Software Skills (Please list programs and proficiency level):

Other Skills and Abilities (List other skills/abilities you possess that are pertinent to this position.):

## References *(business and professional only)*

Name	Title	Company	Phone

## Employment History

<b>Employer (1)</b>	Job title		Dates employed
Work phone	Reason for Leaving		May we contact?
Address	City	State	Zip

Primary Duties/Responsibilities

<b>Employer (2)</b>	Job title		Dates employed
Work phone	Reason for Leaving		May we contact?
Address	City	State	Zip

Primary Duties/Responsibilities

<b>Employer (3)</b>	Job title		Dates employed
Work phone	Reason for Leaving		May we contact?
Address	City	State	Zip

Primary Duties/Responsibilities

## Applicant Certifies:

All statements in this application are true and correct to the best of my knowledge and belief. I understand that false or misleading answers are cause for rejection of this application or dismissal from employment. I also understand that if indicated in the Job Announcement for the position I am applying for, a background check that may include information regarding my criminal records or financial report may be obtained and used by BCAG in making a hiring decision.

By submitting my application to BCAG, I authorize employers, schools, law enforcement agencies, and other individuals and organizations named in this application to provide candid and full information regarding my work record, job performance, character, ability, and fitness to authorized employees of BCAG. I understand that the information may be positive, negative, confidential, and/or privileged in nature and may be used by BCAG in any phase of the employment process. I release current and previous employers, schools, law enforcement agencies, individuals, organizations, and BCAG and its employees/representatives from any liability and/or damages that may result from the release, receipt, or use of requested information.

By checking the I Agree box below, I hereby certify that I have read and understood the instructions, conditions, and other information provided in this document.

I agree:

## Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my employment being terminated.

Name (please print)	Signature
Date	