



**GoRecreation.org**  
AWARD WINNING CALIFORNIA PARKS

901 West Esplanade Ave. San Jacinto, CA 92582 - (951) 654-1505 - FAX (951) 654-5279

## Application for Employment - An Equal Opportunity Employer

### ORGANIZATION

The District was formed in July 1972 by a vote of the people to serve the 800 square mile boundaries. These boundaries encompass Hemet, San Jacinto, Sage, Aguanga, Winchester, Menifee and Valle Vista, French Valley and Romoland/Homeland. The Park District has a park in each geographic area of the District.

### PURPOSE

To contribute to the quality of life in the San Jacinto Valley by creating opportunities for more enjoyable leisure time experiences. This is to be accomplished through the provision of facilities and programs.

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*Valley-Wide Recreation and Park District maintains a policy of the treating of all employees and applicants for employment without regard to race, color, creed, religion, national origin, gender, age, disability, marital status, veteran status, sexual orientation or affectional preference, citizenship or any other characteristic protected by law in all employment decisions, including but not limited to recruitment, hiring, compensation, training, apprenticeship, promotion, upgrading, demotion, downgrading, transfer, layoff, termination and all other terms and conditions of employment.*

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DATE: \_\_\_\_\_ POSITION APPLYING FOR \_\_\_\_\_

PLEASE PRINT

\_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell # \_\_\_\_\_

How long at this address? \_\_\_\_\_ Drivers License No. \_\_\_\_\_

Please list addresses for the last 10 years:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Indicate languages you speak, read, and/or write.

	Fluent	Good	Fair
Speak			
Read			
Write			

Position Applying For: \_\_\_\_\_

Are you presently employed?     Yes     No

If yes, may we contact your present employer?     Yes     No

How did you hear of the job opening for which you are applying? \_\_\_\_\_

Do you have any relative(s), or persons with whom you are involved in a close personal relationship, employed by Valley-Wide Recreation & Park District? If so, list name(s):

Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Were you previously employed by Valley-Wide Recreation and Park District?     Yes     No

From when: \_\_\_\_\_ to: \_\_\_\_\_

Do you have current and unrestricted authorization to work in the United States?     Yes     No

In the event of an emergency, whom may we contact?

Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Are you willing to work evenings?     Yes     No

Are you willing to work weekends?     Yes     No

Are you available to work:     Full-Time     Part-Time     Seasonal     Temporary

On what date would you be available for work? \_\_\_\_\_

Can you travel if the job requires it?     Yes     No

Are you 18 years or older?     Yes     No

Can you, with or without reasonable accommodation, perform the essential functions of the position in which you are interested?     Yes     No

If no, please explain: \_\_\_\_\_

## EDUCATION

	Elementary	High School	College/University	Graduate/Professional
School Name				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Major				

If you have any additional educational, vocational and/or professional information, such as special areas of research or study, training, seminars, etc., please attach such information that is relevant to your application here. If familiarity with a foreign language is listed on the job description, please describe your foreign language skills here. \_\_\_\_\_

Professional memberships, certificates or licenses held. (Exclude those indicating race, color, religion, sex, sexual orientation, national origin, age, physical or mental disability or labor organization affiliations). Supplement this information by written attachment if applicable. \_\_\_\_\_

Please list any paid or volunteer experience in your community. \_\_\_\_\_

**EMPLOYMENT HISTORY (START WITH PRESENT AND ATTACH ADDITIONAL SHEETS, IF NECESSARY. PLEASE DO NOT WRITE "SEE ATTACHED" OR "SEE RESUME".)**

Name			Describe Duties Performed:		
Address:			Title:		
Type of Business		Phone Number			
Employed (Mo./Yr.)	From	To (Mo./Yr.)	Supervisor	May we contact?	Reason for Leaving?

Name			Describe Duties Performed:		
Address:			Title:		
Type of Business		Phone Number			
Employed (Mo./Yr.)	From	To (Mo./Yr.)	Supervisor	May we contact?	Reason for Leaving?

Name			Describe Duties Performed:		
Address:			Title:		
Type of Business		Phone Number			
Employed From (Mo./Yr.)	To (Mo./Yr.)		Supervisor	May we contact?	Reason for Leaving?

Are you a current/former member of CalPERS or another Public Employee Retirement Program? Yes \_\_\_ No \_\_\_

**MILITARY RECORD**

Were you in the U.S. Armed Forces? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Branch: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

List duties in service, including special training: \_\_\_\_\_  
\_\_\_\_\_

**REFERENCES: Give three professional references, not related to you, whom you have known for at least one year.**

1.	_____	_____	_____	_____
	Name	City	Day Phone	Years Acquainted
2.	_____	_____	_____	_____
	Name	City	Day Phone	Years Acquainted
3.	_____	_____	_____	_____
	Name	City	Day Phone	Years Acquainted

I certify that all the information submitted by me on this application is true and complete, and I understand that any false information or omissions will lead to rejection of my application or, if I am employed, discipline up to and including termination at the time such false information or omissions are discovered.

My signature below certifies that I understand that if I am extended an offer of employment by Valley-Wide Recreation and Park District, my employment is contingent upon satisfactory completion of a medical examination (if applicable to the position for which you are applying), including a drug test (if applicable to the position for which you are applying), and submission of proof that I have the credentials and/or licenses (if relevant) necessary for the position that I am offered.

I understand that this application is only valid for the position applied for at present and that Valley Wide-Recreation and Park District is not obligated to retain or consider this application for future openings.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

**Applicant Signature:** \_\_\_\_\_ **Date of Application:** \_\_\_\_\_

**Important Notice**

**Valley-Wide Recreation and Park District has a policy of requiring fingerprints and a physician's exam, together with urine and blood testing of persons who are under consideration for employment. Upon an offer of employment, any such offer shall be conditioned upon the applicant completing a physician's exam as it relates to essential job functions with or without reasonable accommodation, and without risk to the health and safety of the prospective employee or others, together with urine, hair and blood testing as necessary to determine the presence of alcohol, drugs, or other controlled substances. Persons who do not receive said physician's certification of qualification to do the type of work required by the position applied for, or who test positive for the presence of controlled substances in their system will not be considered further. If you have reason to believe that you will not pass a physician's examination or will register positive on a drug and/or controlled substances test, or if you are unwilling to consent to such a test or examination, it is recommended that you not submit an application.**



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**AUTHORIZATION TO RELEASE INFORMATION**

NAME: \_\_\_\_\_  
Last First Middle

OTHER NAMES: \_\_\_\_\_  
(AKA's, prior marriages, maiden names)

SOCIAL SECURITY NUMBER: \_\_\_\_\_

To Whom It May Concern:

**I request and authorize you to release any and all information that you may have concerning my employment record to Valley-Wide Recreation and Park District.**

**I hereby release you, your organization, or others from any liability or damage, which may result from furnishing the requested information.**

I authorize investigation of all statements contained in my application.

I authorize Valley-Wide Recreation and Park District to secure information about my background and experience from current and former employers, educational institutions, public internet forums (i.e. Facebook, MySpace, etc.) and any relevant agencies.

The information is to be used to assist in determining my fitness and qualifications for a position of trust and responsibility.

A photocopy of this release is to be considered as valid as an original. This release will expire one (1) year after the date signed.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Rev. July 2021