



**BAY AREA  
AIR QUALITY  
MANAGEMENT  
DISTRICT**

**EMPLOYMENT APPLICATION**

**Submit to: 375 BEALE STREET, SUITE 600  
SAN FRANCISCO, CA 94105  
☎ (415) 749 - 4980**

*For Human Resources Use Only*

Application Accepted  
 Application Rejected  
 Education       License       Late  
 Experience       Incomplete       Other  
**Comments:** \_\_\_\_\_

**1. FOR WHAT POSITION ARE YOU APPLYING?** *(To be considered, you must be specific)*

**2. NAME**

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

**3. ADDRESS** *(If address is temporary, please indicate)*

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**4. PHONE**

(OK to call you at work?)       (OK to leave message?)  
 Home \_\_\_\_\_ Office \_\_\_\_\_ Message \_\_\_\_\_

**EMAIL** (optional)

**5. IMMIGRATION REFORM & CONTROL ACT**  
If hired, can you provide proof of your legal right to work permanently in the United States?

Yes     No

**6. If you are under the age of 18, can you submit a work permit after an offer of employment has been made?**

Yes     No

**7. Have you ever been a member of the California Public Employees Retirement System?**

Yes     No

**8. Are you related to any District employee or Board member?** *(If yes, give name and relationship)*

Yes     No

**9. When are you available for work?**

*NOTE: Some or all positions may require possession of a valid California driver's license. Employees who drive on District business to carry out job-related duties must possess a valid California driver's license for the class of vehicle driven and meet automobile insurability requirements of the District including review of a recent DMV history.*

**10. EDUCATION**

CIRCLE HIGHEST GRADE COMPLETED	NAME OF SCHOOL	LOCATION	GED
1 2 3 4 5 6 7 8 9 10 11 12			<input type="checkbox"/> Yes <input type="checkbox"/> No

COLLEGE, BUSINESS OR TRADE SCHOOLS ATTENDED	From Mo/Yr	To Mo/Yr	Major	Total Units Earned		Degree Received
				Sem	Qtr	

**POSTGRADUATE STUDY**

NAME	ADDRESS	PHONE

**11. PROFESSIONAL REFERENCES** *(Give contact information for persons who are familiar with your qualifications)*

NAME	ADDRESS	PHONE
1.		
2.		
3.		

**12. EXPERIENCE**

List present or most recent position first, and go back at least ten years. Include all relevant experience. You may attach additional sheets, if necessary.

Name and Address of Employer	From Mo/Yr	To Mo/Yr
	# of Hrs. Worked Per Week	
Position Title	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Earnings \$ per
Supervisor's Name/Title	May we contact him/her? <input type="checkbox"/> Now <input type="checkbox"/> Later	Supervisor's Phone
Description of Your Duties		

Reason for Leaving:

Name and Address of Employer	From Mo/Yr	To Mo/Yr
	# of Hrs. Worked Per Week	
Position Title	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Earnings \$ per
Supervisor's Name/Title	May we contact him/her? <input type="checkbox"/> Now <input type="checkbox"/> Later	Supervisor's Phone
Description of Your Duties		

Reason for Leaving:

Name and Address of Employer	From Mo/Yr	To Mo/Yr
	# of Hrs. Worked Per Week	
Position Title	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Earnings \$ per
Supervisor's Name/Title	May we contact him/her? <input type="checkbox"/> Now <input type="checkbox"/> Later	Supervisor's Phone
Description of Your Duties		

Reason for Leaving:

**13.** I hereby certify that all statements made in this application are true and complete, and I understand that any misstatements or omissions of material facts may subject me to disqualification or dismissal. Further, by signing below, I hereby authorize the Bay Area Air Quality Management District to contact the professional references listed on this application.

<b>DATE</b>		<b>SIGNATURE</b> (In Full)	
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**BAAQMD EMPLOYMENT QUESTIONNAIRE**

**THE FOLLOWING INFORMATION WILL BE REMOVED FROM THIS APPLICATION PRIOR TO ITS REVIEW**

The information on this form is voluntary and confidential. This information will be separated from your application and will not be used to evaluate an applicant's suitability for a position.

**NAME**

First Middle Last

**SEX**     Female     Male

**ETHNIC SELF-IDENTIFICATION**

**Hispanic or Latino** — A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

**White (Non Hispanic or Latino)** — All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

**Black or African American (Non Hispanic or Latino)** — A person having origins in any of the black racial groups of Africa.

**Asian (Non Hispanic or Latino)** — A person 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, the Philippine Islands, Thailand, and Vietnam.

**Native Hawaiian or Other Pacific Islander (Non Hispanic or Latino)** — A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**American Indian or Alaska Native (Non Hispanic or Latino)** — A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

**Two or More Races (Non Hispanic or Latino)** — Persons who identify with two or more racial categories named above.

**Are you a Veteran?**    Yes    No

**HOW DID YOU FIND OUT ABOUT THIS POSITION?**

BAAQMD Bulletin Board                       BAAQMD Employee                       Mailed Notice

Website (Please be specific) \_\_\_\_\_

Newspaper (Please be specific) \_\_\_\_\_

Professional Publication (Please be specific) \_\_\_\_\_

Other (Please be specific) \_\_\_\_\_