

## Application for Employment

(Equal Opportunity Employer)

ame (First)	(MI))	(Last)		
Street/P.O. Box		Phone (Da)	Phone (Day)	
ity	State	Zip Phone (Eve	ening)	
re you 18 years old or over?	☐ Yes ☐ No Work Permi	t required if under 18 and	still in high school.	
ave you worked for the Mont yes, when?	erey County Fair in the past? Desition	Yes		
yes, have you worked as a re yes, have you received uner yes, what was the date of you IOTE: Individuals who have	ia Public Employees' Retirement etired annuitant since retiring? [mployment insurance benefits based are last unemployment insurance are received unemployment insurance as State of California until 12 mo	Yes No sed on employment as a reti payment? rance benefits based on el	red annuitant?	
I. EDUCATION				
☐ High School ☐ GED	1 2 3 4+ Co	llege Degree/Major:		
	ORY STATEMENT	y? □ Yes	□ No	
lave you <u>EVER</u> been convid	cted of a misdemeanor or felon . Attach additional pages if neo	_		
Have you <u>EVER</u> been convid	·	_	Sentence	
lave you <u>EVER</u> been convid f yes, provide details below	. Attach additional pages if ned	cessary.		
f yes, provide details below	. Attach additional pages if ned	cessary.		

## V. EXPERIENCE

EXPERIENCE: BEGIN WITH YOUR MOST RECENT EXPERIENCE. LIST ALL EXPERIENCE IN THE LAST FOUR YEARS, INCLUDING U.S. MILITARY SERVICE. GIVE DETAILS ON THE EXPERIENCE WHICH YOU BELIEVE HELPS YOU MEET THE REQUIREMENTS OF THE POSITION FOR WHICH YOU ARE APPLYING. IF YOU HAVE NOT HELD A PAYING JOB INCLUDE ANY VOLUNTEER WORK IN YOUR COMMUNITY, BABYSITTING JOBS, NEWSPAPER ROUTES, ETC.

DEDICE OF EMPLOYMENT	JOB CLASSIFICATION AND MOST	NAME AND ADDRESS OF		
PERIOD OF EMPLOYMENT	IMPORTANT DUTIES PERFORMED.	EMPLOYER(S)		
Dates of Employment	SALARY: \$PER			
	DUTIES:			
TotalYRMO.				
FULL -TIME   PART-TIME				
HOURS PER WEEK:		REASON FOR LEAVING:		
Dates of Employment		<u> </u>		
	SALARY: \$PER			
	DUTIES:			
Total YR MO.				
FULL -TIME   PART-TIME				
TOLL = TIME   TAKT=TIME		BEACON FOR LEAVING.		
HOURS PER WEEK:		REASON FOR LEAVING:		
Dates of Employment	SALARY: \$PER			
	DUTIES:			
TotalYRMO.				
FULL -TIME   PART-TIME				
HOURS PER WEEK:				
		REASON FOR LEAVING:		
Dates of Employment				
	SALARY: \$PER			
	DUTIES:			
TotalYRMO.				
I OtalI RIVIO.				
FULL -TIME   PART-TIME				
FULL = HIVE   FAIX I - HIVE				
HOURS PER WEEK:		REASON FOR LEAVING:		
/I. SCHEDULE AVAILABILITY				
Check the shift(s) you are available to work. ☐ Days ☐ Evenings ☐ Graveyard				

Monterey County Fair 2004 Fairground Road Monterey, CA 93940 (831) 372-5863 As an applicant for employment with the **Monterey County Fair**, I understand the following:

- 1. Any material or deliberate omission of any fact in my application may be justification for refusal of, or if employed, termination from employment. It is my understanding that Monterey County Fair may make an investigation of my work history and may verify any information given in application for employment, related papers, or oral interviews. I herewith release from liability any person giving or receiving any such information. I agree that my employment may be terminated by Monterey County Fair at any time without liability for wages or salary except such as may have been earned at the date of such termination.
- 2. I understand that the business needs of Monterey County Fair may, at times, require me to work excess hours, shift work and/or a rotating schedule other than Monday through Friday. I further understand that I may work in a classification where my rate of pay may be straight time regardless of number of hours worked. Social Security will not be withheld from my wages unless I am a member of the California Public Employee's Retirement System (CalPERS). Medicare will be deducted. All employees not eligible for membership in CalPERS will automatically be enrolled in the States Part-time, Seasonal, Temporary Retirement Plan (PST).
- 3. I further understand that the signing of this application does not constitute an offer of employment by Monterey County Fair. In the event of employment, I understand that I am required to abide by all rules and regulations of the employer.
- 4. I understand that I will be required to furnish documents that establish my identity and eligibility to work in the United States (e.g., driver's license and original social security card), in compliance with the Immigration and Reform Act of 1986.
- 5. I certify that I have read, understand, and will adhere to the aforementioned statements.

An equal opportunity employer to all regardless of race, color, creed, national origin, ancestry, sex, marital status, discordance. It is an objective of the State of California to achieve a drug-free State workplace. Any applicant for accordance with this objective because the use of illegal drugs is inconsistent with the law of the State, the rules go public servants.	or State employment will be expected to behave in			
Signature of Applicant:	Date:			
If applicant is under 18 years of age, parent or guardian's signature is required:				
Signature of Parent or Guardian:	Date:			