



Central Marin Police Authority
250 Doherty Drive
Larkspur, CA 94939



PLEASE PRINT LEGIBLY OR TYPE
 INCOMPLETE OR IMPROPERLY COMPLETED APPLICATIONS WILL BE RETURNED

EMPLOYMENT APPLICATION FOR:

Exact job title

1. _____
 First Name Middle Name Last Name Social Security No.

2. HOME ADDRESS _____
 Number Street City State Zip

3. TELEPHONE _____
 (Home) (Business) (Cell)

3a. Email Address _____

4. (a) POLICE OFFICER APPLICANTS: Can you show proof that you are at least 21 years old at time of hire? YES NO
 (b) OTHER APPLICANTS: Can you show proof that you are at least 18 years old at time of hire? YES NO
 (c) Can you show proof of your legal right to work in this State at time of hire? YES NO

5. MILITARY SERVICE _____
 Branch Dates Serial Number Rank at Discharge

 Type of Release Reserve Status Selective Service Class

6. HAVE YOU EVER BEEN CONVICTED OF ANY CRIMES OTHER THAN MINOR TRAFFIC CITATIONS? YES NO

7. **EDUCATION**

Highest Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12	High School Last Attended	Location			Graduated	
		YES	NO			
College(s) or Trade School(s) Attended & Location	Major Subject	Semester Units	Quarter Units	Degree	Mo./Yr.	

8. Have you completed a P.O.S.T. Basic Academy? YES NO
 If yes, name of Academy and graduation date: _____

9. Typing Speed: _____ Driver's License: _____
 Serial Number License Expiration Date / State

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10. CURRENT EMPLOYMENT

Employer _____	Title and Duties _____
Address _____	_____
_____	_____
Phone () _____	_____
Supervisor _____	_____
From _____	Reason for Leaving _____
May we contact your present employer? YES NO	

PREVIOUS EMPLOYER

11. List most recent experience first. Carefully account for all employment, paid or unpaid, OVER THE LAST 10 YEARS. If you wish to elaborate on your experience, a supplemental sheet may be attached, but this section must be completed.

Employer _____	Title and Duties _____
Address _____	_____
_____	_____
Phone () _____	_____
Supervisor _____	_____
From _____	Reason for Leaving _____
Employer _____	Title and Duties _____
Address _____	_____
_____	_____
Phone () _____	_____
Supervisor _____	_____
From _____	Reason for Leaving _____

REMARKS (identify each by number). Attach additional sheet if necessary.

The Central Marin Police Authority prohibits discrimination against employees or applicants for employment on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age (40 and over), sexual orientation, or military and veteran status or any other basis protected by law. (Gov. Code § 12940(a).)

I certify that the information contained in this application is true to the best of my knowledge and belief. I understand that any misrepresentation of fact, as stated or implied, on this or any other employment form, will be sufficient reason not to hire me and may be cause for my dismissal.

I understand the Central Marin Police Authority is in no way obligated to provide employment and that I am in no way obligated to accept employment. This application does not bind either party for a specific period of time regarding employment and the statements herein do not constitute any sort of contract of employment.

Signature _____ Date _____

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