



CITY OF LOS ALTOS
One North San Antonio Road
Los Altos, CA 94022-3088
Ph: 650.947.2700 Fx: 650.947.2701

INDEPENDENT CONTRACTOR APPLICATION

An Equal Employment Opportunity / Affirmative Action Employer M/F/V/D

General Information

1. Please type or print responses in ink.
2. This application must be completed in full.
3. If additional space is needed or you wish to attach pertinent supplemental information, please attach additional sheets.
4. A resume will not be accepted in lieu of a completed application.
5. All materials submitted will not be returned.

Position applying for: _____ **Date:** _____

Personal Information

Last name _____ First name _____ Middle name _____

Street address _____ City _____ St _____ Zip _____

Telephone Number: Home _____ Business _____

Social Security Number _____ Please list age if under 18 _____

Do you have a valid driver's license? ___ State issued by ___ Number _____

Type _____ Expiration date _____

Do you have any relatives employed by the City of Los Altos or on the City Council or other City Commissions? _____

If yes, please state name: _____ Department _____

Relationship _____

If hired, can you provide evidence of citizenship or right to work in USA? _____

Education

Name of high school last attended _____

Location (City, State) _____

High school diploma or G.E.D. Yes ____ No ____

College, University, Trade School _____

Number of quarters or
semesters attended? _____

Part Time
Full Time
Student

Major
Subject
Studied

List college degrees received, professional licenses, or registration:

Employment History

List all work experience for the last 5 years (including non-paid volunteer work), beginning with most recent. Additional sheets may be attached, if necessary.

Name and address of employer: _____

Date employed: From _____ To _____ Total months _____ Hours per week _____
(month/year) (month/year)

Salary: Start _____ Final _____
(monthly/weekly/hourly) (monthly/weekly/hourly)

Supervisor's name _____

Supervisor's title and phone number: _____

Job title and description of duties:

May we contact this employer? _____ Reason for leaving? _____

Employment History (Continued)

Name and address of employer: _____

Date employed: From _____ To _____ Total months _____ Hours per week _____
(month/year) (month/year)

Salary: Start _____ Final _____
(monthly/weekly/hourly) (monthly/weekly/hourly)

Supervisor's name _____

Supervisor's title and phone number: _____

Job title and description of duties:

Reason for leaving? _____

Name and address of employer: _____

Date employed: From _____ To _____ Total months _____ Hours per week _____
(month/year) (month/year)

Salary: Start _____ Final _____
(monthly/weekly/hourly) (monthly/weekly/hourly)

Supervisor's name _____

Supervisor's title and phone number: _____

Job title and description of duties:

Reason for leaving? _____

Convictions

Have you ever been convicted of a felony or a misdemeanor? Yes ____ No ____

If Yes, please attach--on a separate sheet--the following information for each offense: 1) date, 2) charge, 3) place, 4) court, and 5) action taken. You may omit: a) traffic violations for which you paid a fine of \$50 or less, and b) any offense committed before your 18th birthday which was settled in a juvenile court or under a Youth Offender Law. (A conviction will not necessarily disqualify applicant from the job applied for.)

Medical

Do you have any physical condition which may limit your ability to perform the job you are contracting for? Yes ____ No ____

If yes, please explain work limitations and what can be done to accommodate your limitations:

References

List three people who know you well and are capable of commenting on either your work skills, personal skills, or both:

Name	Address	Relation to you	Telephone
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Additional Information (awards, special qualifications, foreign language ability, etc.)

Agreement

Please read carefully before signing.

I hereby certify that all statements made in this application are true and complete. I understand that this application will be used in determining my qualifications for contract employment with the City. I understand that, if hired, I will be required to comply with all rules and regulations. Furthermore, that the benefits and rules and regulations may be changed, modified, deleted, or added to at any time at the City's sole option and without prior notice. I further agree to be fingerprinted and to furnish such proof of meeting the conditions of the contract position.

Signed _____ Date _____