



CALIFORNIA STATE SENATE

EMPLOYMENT APPLICATION

| | | | | |
|-----------|------------|----------------|-------------------|------------|
| Last Name | First Name | Middle Initial | Social Security # | |
| | | | () | |
| Address | | | Area Code | Home Phone |
| | | | () | |
| City | State | Zip Code | Area Code | Work Phone |

EMPLOYMENT DATA

| | | |
|---|---|-----------|
| Position Desired: | Full-Time | Part-Time |
| Salary Desired: | Date Available to Begin Work: | |
| Have you ever worked for the State Legislature before? Yes No | House: | |
| Have you ever worked for the State of California before? Yes No | Department: | |
| Name of Current Employer: | May we contact your current employer? Yes No | |
| Referred to Senate Rules Committee by: | | |
| If related to a current Senate employee, please list name and relationship: | | |
| Are you currently receiving income benefits or have you made an application to retire from the California Public Employees' Retirement System (CalPERS)? Yes No | | |

EDUCATION

| List school name and location, beginning with high school: | Major | Degree | Years Completed | Did you Graduate? |
|--|-------|--------|-----------------|-------------------|
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Do you have any other experience, training, qualifications, or special skills, which you feel may make you especially suited in performing the job for which you are applying? If so, please explain:

Have you ever been convicted of a felony? Yes No

EMPLOYMENT RECORD

(Start with current or most recent employer and include military service, if any. Attach additional sheets if necessary).

| | | | |
|-----------------|----------------|----------------------|--------------------|
| Company Name: | | Job Title and Duties | Reason for leaving |
| Address: | | | |
| City: | State: | | |
| From (mm/yy): | To (mm/yy): | | |
| Supervisor: | | | |
| Phone: | | | |
| Hours per week: | Ending Salary: | | |

| | | | |
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| Phone: | | | |
| Hours per week: | Ending Salary: | | |

Certification: I declare under the penalty of perjury, that this statement has been completed by me and to the best of my knowledge and belief, is a true, correct, and complete statement in answer to the questions contained herein.

SIGNATURE:

DATE: