



**APPLICATION for NON-ACADEMIC EMPLOYMENT**  
**Classified Staff and Administrators/Temporary Hourly Workers**

Santa Clarita Community College District  
 26455 Rockwell Canyon Rd. • Santa Clarita, California 91355  
 (661)362-3428 (Human Resources) • www.canyons.edu

(PLEASE PRINT OR TYPE)

Date of Application \_\_\_\_\_

**Position Applied For:** \_\_\_\_\_

The applicant should exercise the greatest care in preparing this form. Information herein becomes a legal part of the contract in case of election. Do not omit any item. Print "NA" on any section that is not applicable.

**ADDITIONAL MATERIALS MAY BE REQUIRED**

Please note that most positions require additional supplemental materials to be submitted to complete the application process. Your application is not considered complete until all materials have been received by the Human Resources Office. See employment opportunity announcement for details.

**MINIMUM QUALIFICATIONS**

The minimum qualifications for each position are listed in the employment opportunity announcement. Please review the announcement for the position you are applying for before answering these questions. Candidates will not be considered who do not meet the minimum qualifications or equivalent.

Do you meet the minimum education requirement(s) as listed in the employment opportunity announcement?  Yes  No

Do you meet the minimum work experience requirement(s) as listed in the employment opportunity announcement?  Yes  No

**PERSONAL INFORMATION**

Preferred title:  Mr.  Ms.  Dr.  None

Name \_\_\_\_\_  
Last First M.I.

Please list all other names you have used in employment or while attending school: \_\_\_\_\_

Home Address \_\_\_\_\_  
Number Street City State Zip Code

Home Telephone \_\_\_\_\_ Cell or Message Telephone \_\_\_\_\_

Work Telephone \_\_\_\_\_ May we contact you at work?  Yes  No

E-mail Address \_\_\_\_\_

**Continued**

**GENERAL INFORMATION**

1. On what date are you available to start work? \_\_\_\_\_

2. Have you ever been dismissed from employment (or resigned in lieu of being dismissed) for inefficiency, delinquency or misconduct? A "yes" answer will not automatically preclude you from consideration for employment.  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

3. Are you a current or former employee of this District?  Yes  No If yes, give date \_\_\_\_\_  
Position(s) \_\_\_\_\_

4. Have you ever applied for a position at College of the Canyons before?  Yes  No If yes, give date \_\_\_\_\_  
Position(s) \_\_\_\_\_

5. Do you have any relatives working for College of the Canyons?  Yes  No  
"Relatives" includes all parents, step-parents, children, step-children, grandparents, brothers, sisters, step-brothers, step-sisters, aunts, uncles, cousins, and in-laws. If yes, please list relative(s) employed at C.O.C. including name, relationship, and department. \_\_\_\_\_

6. Do you have a valid driver's license?  Yes  No State of issuance \_\_\_\_\_ Exp. Date \_\_\_/\_\_\_/\_\_\_

7. If hired, can you provide proof of authorization to work in the United States?  Yes  No

8. Have you been convicted of a felony or misdemeanor criminal offense? Includes convictions by court martial and driving under the influence (DUI). You do not need to include minor traffic violations. Failure to report convictions prior to the closing or first review date for the position may jeopardize employment with the District.  
 Yes  No

Please explain any "yes" answer including nature of offense(s), when and where convicted, and disposition of the case. \_\_\_\_\_  
\_\_\_\_\_

9. Are you able to perform all of the job functions listed on the job description for the position for which you are applying, either with or without reasonable accommodation?  Yes  No

If not, please describe the function(s) that cannot be performed. \_\_\_\_\_  
\_\_\_\_\_

If an accommodation is needed, what type of accommodation is needed? \_\_\_\_\_  
\_\_\_\_\_

10. Each position may have unique scheduling needs. If required, which of the following are you willing and able to work? Check all that apply.

- Full-time
- Day Shift
- Evenings
- Part-time
- Swing Shift
- Saturday
- Temporary
- Graveyard
- Sunday

**EDUCATION AND TRAINING**

Please read the educational requirement in the employment opportunity announcement before completing this section. Copies of college transcripts are required to apply for all positions where college coursework or degrees are required. If hired, official transcripts will be required. If additional space is needed, please submit additional education and training information with your supplemental materials.

In the space(s) below, list all accredited post-secondary institutions attended. Please list highest degrees first.

School	City/ State	Degree Received or in Progress	Actual or Expected Date of Degree	Program/ Major	Semester Units Completed	Quarter Units Completed

Complete this section only if you do not hold an Associate’s, Bachelor’s or Advanced degree

Last High School Attended	City/ State	Did You Graduate?	If not, do you hold a high school equivalency certificate?

**TRADE/VOCATIONAL SCHOOLS AND/OR CERTIFICATE PROGRAMS**

Trade School or Program	City/State	Courses or Training Completed	Degree or Certificate Awarded	Certificate Expires

**LICENSES AND CERTIFICATION**

Please list all relevant certificates, licenses, and credentials:

CERTIFICATE/LICENSE/CREDENTIAL	ISSUED BY	DATE

Continued

## EMPLOYMENT HISTORY

Please read the experience requirements in the employment opportunity announcement before completing this section. Be sure you describe the duties you performed which demonstrate you have the knowledge, skills, and abilities to perform the duties of this position. Include any supervisory or lead functions including number of employees supervised/lead.

Please do not include notations such as “see resume” on the application. Resumes are not accepted in place of any part of this application although you may be required to include a resume with your materials. Please read the employment opportunity announcement to see if a resume is required for this position.

In the space below please enter your complete employment history. Include all employment experience listing the most recent position first. If you held more than one position with the same employer, list each position separately. Please fill out completely. Do not leave blanks. If additional space is needed, please submit additional information, in the same format, on a separate sheet.

		Dates Employed		Duties Performed
		From	To	
Employer Name				
Address		Total Time at This Job		
City/State/Zip		# Months Per Year		
Telephone		Hours Per Week		
Job Title/Position		Starting Salary		
Supervisor/ Name & Title		Ending Salary		
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		Dates Employed		
		From	To	
Employer Name				
Address		Total Time at This Job		
City/State/Zip		# Months Per Year		
Telephone		Hours Per Week		
Job Title/Position		Starting Salary		
Supervisor/ Name & Title		Ending Salary		
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Continued

**EMPLOYMENT HISTORY CONTINUED**

		Dates Employed From To		Duties Performed
Employer Name				
Address		Total Time at This Job		
City/State/Zip		# Months Per Year		
Telephone		Hours Per Week		
Job Title/Position		Starting Salary		
Supervisor/ Name & Title		Ending Salary		
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		Dates Employed From To		Duties Performed
Employer Name				
Address		Total Time at This Job		
City/State/Zip		# Months Per Year		
Telephone		Hours Per Week		
Job Title/Position		Starting Salary		
Supervisor/ Name & Title		Ending Salary		
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
		Dates Employed From To		Duties Performed
Employer Name				
Address		Total Time at This Job		
City/State/Zip		# Months Per Year		
Telephone		Hours Per Week		
Job Title/Position		Starting Salary		
Supervisor/ Name & Title		Ending Salary		
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Continued

## UNEMPLOYMENT

Please explain gaps or periods of unemployment of 6 or more months.

FROM (MM/YY)	TO (MM/YY)	REASON

## SKILLS AND QUALIFICATIONS

Please list computer software learned or used and check level of expertise:

Software	Beginner	Intermediate	Advanced	Used on the job how long?

Typing/Data Entry speed (wpm) \_\_\_\_\_  Certified  Estimated  
 Dictation Speed (wpm) \_\_\_\_\_  Certified  Estimated  
 10 key proficiency  Yes  No  
 Bookkeeping/Budget Experience  Yes  No

Please list all languages, other than English, in which you are fluent. Check "Read", "Write" or "Speak" as applicable.

(1) Language	Read	Write	Speak	(2) Language	Read	Write	Speak	(3) Language	Read	Write	Speak

Please list other skills and abilities or proof \_\_\_\_\_  
 of technical competence not listed above: \_\_\_\_\_

## REFERENCES

Please provide three current professional references who are familiar with your work-related abilities and background. Please do not include relatives. Professional references should be current or recent direct supervisors. You may be asked for alternate names and numbers if listed contacts are not available. In addition, please read the employment opportunity announcement for requirements of additional references.

Name of Reference	Company
Title	City/State
Telephone	Type of Business
Name of Reference	Company
Title	City/State
Telephone	Type of Business
Name of Reference	Company
Title	City/State
Telephone	Type of Business

Continued

**STATEMENT OF VERACITY/ACKNOWLEDGEMENTS**

\_\_\_\_\_  
(Initial) I certify that the information submitted in this application and in all other application materials is true and complete to the best of my knowledge and belief. I understand that falsifying any information on this application and/or any other application materials submitted, or failing to provide any information requested, may be grounds for a District decision not to hire me. If the District learns after I have been hired that I have provided false information on this application or in other submitted application materials, I understand that my employment may be terminated immediately.

\_\_\_\_\_  
(Initial) I authorize the Santa Clarita Community College District to thoroughly investigate my prior work performance, education, and other matters related to my suitability for employment. I further authorize my prior employers, educational institutions, associates, and those listed as references to disclose any and all information related to my education and suitability for the position applied for, without giving me prior notice of such disclosure. In addition, I hereby release the Santa Clarita Community College District, my former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_  
(Initial) I understand that it is my responsibility to review the employment opportunity announcement for this position for all application requirements and that my application is not considered complete until all materials are received by the Human Resources Office. Incomplete applications may cause delays and/or disqualification for employment with the Santa Clarita Community College District.

\_\_\_\_\_  
(Initial) I understand that any employment offer is contingent on my passing a background screening process including fingerprinting.

\_\_\_\_\_  
(Initial) I understand that if I receive an offer of employment, it may be contingent upon passing a post-offer medical examination.

\_\_\_\_\_  
(Initial) I understand this application and all supporting documents become the property of the Santa Clarita Community College District and will not be released nor returned.

\_\_\_\_\_  
(Initial) I understand that, if hired, I will be required to furnish proof of my identity and employment eligibility.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**PLEASE BE SURE TO SUBMIT ALL REQUIRED APPLICATION MATERIALS  
TO THE HUMAN RESOURCES OFFICE  
BY 5 P.M. ON THE REVIEW DATE.**

Santa Clarita Community College District/ College of the Canyons  
Human Resources Office  
26455 Rockwell Canyon Rd.  
Santa Clarita, CA 91355  
(661)362-3428

In order for us to evaluate our recruitment practices, please take a few minutes to complete the voluntary survey included with this application. The voluntary survey will not be included when your application materials are reviewed. It is for statistical reference only.

Name: \_\_\_\_\_

**CONFIDENTIAL RECRUITMENT SOURCE INFORMATION**  
**Santa Clarita Community College District/College of the Canyons**

The Santa Clarita Community College District does not discriminate on the basis of race, religious creed, color, ethnic or national origin, ancestry, citizenship status, uniformed service member status, physical disability, mental disability, medical condition, marital status, sex, pregnancy, age, sexual orientation, gender identity, or any other protected basis under the law. In order for us to evaluate our recruitment practices, please take a few minutes to complete this voluntary survey. The information on this survey is for statistical purposes only and will not be used in making any employment related decision.

**WHERE DID YOU LEARN ABOUT THIS POSITION?**

- Agency
- California Community College Registry
- CareerBuilder.com
- Career Fair
- CASBO
- Chronicle of Higher Education – Print
- Chronicle of Higher Education - Online
- COC Email
- COC Employee Referral
- COC Job Hotline
- COC Mailing
- COC Website
- Daily News
- Edjoin.org
- Employment Development Dept (EDD)
- HERC
- HigherEdJobs.com
- Los Angeles Times
- Monster.com
- Professional Association Website (please specify) \_\_\_\_\_  
\_\_\_\_\_
- The Signal
- Trade Journal/Publ. (please specify) \_\_\_\_\_  
\_\_\_\_\_
- Walk-in
- Website – Other (please specify) \_\_\_\_\_  
\_\_\_\_\_
- Other (please specify) \_\_\_\_\_  
\_\_\_\_\_

**GENDER**

- Male
- Female
- I choose not to respond

**DISABILITY STATUS**

- I am disabled  
(Physical or mental impairment which substantially limits one or more life activities, including any psychological disorder or condition, cosmetic disfigurement or anatomical loss.

**VETERAN STATUS**

- I am a veteran

**HISPANIC ETHNICITY**

Are you Hispanic or Latino?

- No, I am not Hispanic or Latino
- Yes, I am Hispanic or Latino
  - Mexican, Mexican-American, Chicano
  - Central American
  - South American
  - Hispanic Other

If you answered “Yes” to being of Hispanic or Latino ethnicity, please stop here.

**RACE (Choose all that apply)**

- American Indian or Alaskan Native
- Asian – Asian Indian
- Asian - Cambodian
- Asian – Chinese
- Asian – Filipino
- Asian - Japanese
- Asian – Korean
- Asian – Laotian
- Asian - Vietnamese
- Asian – Other Asian
- Black/African-American (not Hispanic)
- Guamanian
- Hawaiian
- Samoan
- White (not Hispanic)
- Pacific Islander
- Unknown
- I choose not to respond

- |  |                                  |                                     |                                  |                                |
|--|----------------------------------|-------------------------------------|----------------------------------|--------------------------------|
| <input type="checkbox"/> Administrator | <input type="checkbox"/> Faculty | <input type="checkbox"/> Classified | <input type="checkbox"/> Adjunct | <input type="checkbox"/> Other |
|--|----------------------------------|-------------------------------------|----------------------------------|--------------------------------|