



EMPLOYMENT APPLICATION
CITY OF BISHOP
P. O. Box 1236, Bishop, CA 93515
377 West Line Street, Bishop, CA 93514
City Hall 760-873-5863

PLEASE TYPE OR PRINT

Position Title: _____ Department: _____

Name: _____ Home Phone: _____ Work: _____
 Last First Middle Area Code Area Code

Street Address: _____ City: _____ Zip: _____

Mailing Address: _____ Drivers License: Class ___ Number _____ Expires _____
 City State Zip

In Case of Emergency Notify: _____
 Name Address City Phone No.

Circle Highest School Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12 Graduated: Yes No

Name of last high school attended: _____ Location: _____

Name and Location of Colleges/ Universities Attended	Major	Degree	Last Year Attended

Technical or Professional Licenses: _____

Membership in Professional/Technical Associations: _____

Have you been convicted of any crime or violation of any law or statute (other than minor traffic violations) and other than convictions for which the record has been judicially sealed, expunged or statutorily eradicated, and other than misdemeanor convictions for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed. Yes _____ No _____

Are you now, or have you ever been, a member of the California Public Employees Retirement System? Yes _____ No _____

Do you have any relatives employed by the City of Bishop? Yes _____ No _____

Please provide a full explanation to any "YES" responses above: _____

