



# County of San Bernardino EMPLOYMENT APPLICATION

Department of Human Resources

24-Hour Job Hotline: (909) 387-5611

[www.sbcounty.gov/hr](http://www.sbcounty.gov/hr)

*You are encouraged to apply online.*

**FAILURE TO COMPLETE ALL ITEMS ON THIS APPLICATION WILL RESULT IN YOUR ELIMINATION FROM THE EXAMINATION PROCESS.**

Announcement Number			Job Title for which you are applying. <b>(Apply for only one job per application.)</b>		
Last Name	First Name	MI	Month/Day of Birth: MM: /DD:	Last Name at Birth	
List any other names you have ever used			I prefer Human Resources notify me by: (select one) <input type="checkbox"/> E-mail <input type="checkbox"/> Paper		
Mailing Address		Apt #	City	State	Zip Code
Primary Phone		Alternate Phone		E-Mail Address	

**WORK AVAILABILITY:** Indicate the type of appointment you will accept.  Full-Time  Part-Time  Temporary or Extra-Help

**WORK SHIFT:** Indicate your availability for the following shifts. Refusing a shift you have selected will result in removal from the list.  
 Day  Swing  Night  Rotating  Weekend

**WORK LOCATION:** Indicate all locations where you are willing to accept employment. Refusing a job offer, if you check its location below, will result in removal from the list.

WEST END	VALLEY	LOWER DESERT	UPPER DESERT	MOUNTAINS
<input type="checkbox"/> Ontario/Chino	<input type="checkbox"/> San Bernardino/Colton	<input type="checkbox"/> 29 Palms	<input type="checkbox"/> Victorville/Hesperia	<input type="checkbox"/> Crestline
<input type="checkbox"/> Rancho Cucamonga	<input type="checkbox"/> Fontana/Rialto	<input type="checkbox"/> Joshua Tree/Yucca Valley	<input type="checkbox"/> Barstow	<input type="checkbox"/> Running Springs
	<input type="checkbox"/> Redlands/Yucaipa/ Loma Linda		<input type="checkbox"/> Needles	<input type="checkbox"/> Big Bear
				<input type="checkbox"/> Lake Arrowhead/Blue Jay/ Twin Peaks

**BILINGUAL SKILLS:** List any languages other than English in which you are fluent. \_\_\_\_\_  Write  Speak

**CONVICTIONS:** Pursuant to California Labor Code sections 432.7 through 432.9, upon meeting the minimum qualifications for any position, applicants may be required to provide information about their criminal conviction history as an adult (age 18 and older). Such conviction information includes misdemeanor or felony convictions, guilty or no contest pleas, and findings of guilt regardless of whether sentence is imposed by the court. (Exclude misdemeanor marijuana-related offenses over two years old pursuant to California Labor Code 432.8.). Convictions are evaluated for each position and are not necessarily disqualifying.

I understand that if I have been determined to meet the minimum qualifications for any position, I may be required to provide information regarding my criminal conviction history since the age of 18 upon request.

**Veterans' Preference Points:** Eligible veterans and the spouses or widows(ers) of veterans *who are not currently County employees* may be awarded additional points. To claim Veterans' Preference, you **must** select one of the options below and submit the required documentation **within 48 hours** of application. To be given credit, you must include your name and recruitment title on each document. For additional information, refer to the County's Veterans' Preference Policy.

- None-I am not an eligible veteran.
- I am a **veteran** requesting 5 points and will submit a copy of my DD214 or V.A. letter.
- I am a **disabled veteran** requesting 10 points and will submit a copy of my DD214 and evidence of disability (i.e., V.A. letter indicating percentage of disability).
- I am the **spouse of a disabled veteran** requesting 5 points and will submit a copy of my spouse's DD214 and evidence of disability (i.e., V.A. letter indicating percentage of disability).
- I am the **widow(er) of a veteran** requesting 5 points and understand that I must submit a copy of the DD1300.

**Are you a current County of San Bernardino employee?** (Excludes individuals on assignment through temporary agencies)  Yes  No If so, list your current job title, department, and Employee ID: Current Job Title: \_\_\_\_\_ Department: \_\_\_\_\_ Employee ID: \_\_\_\_\_ **You must include your current County job in the work history section of this application.**

**How did you learn about this position?**  San Bernardino County website  Referred by other County employee: \_\_\_\_\_  
 Job Fair: \_\_\_\_\_  Newspaper/Journal: \_\_\_\_\_  Website: \_\_\_\_\_  Other: \_\_\_\_\_

**IF YOU NEED SPECIAL TESTING ARRANGEMENTS DUE TO A DISABILITY, YOU MUST COMPLETE A SPECIAL TESTING ACCOMMODATION REQUEST FORM BY THE FILING DEADLINE. CALL (909) 387-8304 or 711 FOR TTY USERS, FOR ASSISTANCE.**

**CERTIFICATE OF APPLICANT:** I certify that all statements made in this entire application, including any attachments, are true and complete to the best of my knowledge. I understand that any false statements of material facts will subject me to disqualification or dismissal. I have completed all sections of the application and supplemental application. I understand that I cannot change or amend any information related to my qualifications for this position once my application has been submitted. I may only change information regarding personal or contact information or job availability preferences.

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**- REVERSE SIDE MUST BE COMPLETED -**

**Human Resources Employment Division - San Bernardino**  
157 West Fifth Street, First Floor, San Bernardino, CA 92415-0440  
(909) 387-8304 • California Relay Service: 711 (FOR TTY USERS)

Please visit our website: [www.sbcounty.gov/hr](http://www.sbcounty.gov/hr).

**EEO/ADA Compliant Employer**

**SAN BERNARDINO COUNTY HUMAN RESOURCES**

Completion of this section is optional; the information provided will only be used for statistical purposes. It will be detached and not used to make any decisions that affect you.

Position applied for: \_\_\_\_\_

**Gender:**  Male  Female **Age Group:**  Under 40  40 or over

**Race/Ethnic Category**

- American Indian or Alaskan Native:** A person having origins in any of the original peoples of North, Central, and South America, and who maintains tribal affiliation or community attachment.
- Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or Other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Black or African American:** A person having origins in any of the black racial groups of Africa.
- White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Two or more of the above categories**

**EXPERIENCE:** Provide a complete employment history; list your **current or most recent job first**. If additional space is needed, attach a sheet of paper and provide all information as requested on this application. Do not refer to a résumé. Only those jobs listed will be considered in determining your eligibility. List each job title separately, even if the employer is the same. Incomplete information will result in disqualification.

From (Mo/Day/Yr)	Title of Your Most Recent Position	Company Name	Phone	Name & Title of Immediate Supervisor
To (Mo/Day/Yr)	Number and Street	City	State	Reason for Leaving
Hours Worked Per Week	Description of Duties			
				<i>FOR OFFICE USE</i>

From (Mo/Day/Yr)	Title of Position	Company Name	Phone	Name & Title of Immediate Supervisor
To (Mo/Day/Yr)	Number and Street	City	State	Reason for Leaving
Hours Worked Per Week	Description of Duties			
				<i>FOR OFFICE USE</i>

From (Mo/Day/Yr)	Title of Position	Company Name	Phone	Name & Title of Immediate Supervisor
To (Mo/Day/Yr)	Number and Street	City	State	Reason for Leaving
Hours Worked Per Week	Description of Duties			
				<i>FOR OFFICE USE</i>

**EDUCATION:** (If Job Announcement requires coursework in specific areas, attach a list of applicable completed courses.)

College or University (City, State)	Major/Minor	Type of Degree (Associate's, Bachelor's)	Units Completed	
			Semester	Quarter
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		

**LICENSES/CERTIFICATIONS:** Use this space to list license or certificate number and expiration date; other courses, training or education specifically required.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*NOTE: If you believe your civil rights in employment matters have been violated at any time during the course of your consideration for employment, contact the Equal Employment Opportunity Office, 157 West Fifth Street, First Floor, San Bernardino, CA 92415-0440, phone: (909) 387-5582 (do not call this number for general employment or job application information). For employment information call: (909) 387-8304.*

***Thank you for your interest in employment with the County of San Bernardino, The Employer of Choice!***

**Applications are accepted only for jobs that are in the open recruitment process.** Your application must be filed in the Employment Division office by the closing date listed on the job announcement. A separate application must be submitted for each position, unless otherwise indicated on the announcement. It is the applicant's responsibility to obtain and read the announcement. The Human Resources Director may specify the maximum number of eligible candidates to be processed at each step of the exam process. You may not reapply for the same job for six (6) months.

**Please note that we are unable to provide photocopies of applications, résumés or other materials.** ONLY those materials specifically requested by this office will be retained; all others will be discarded.

## Public Authority Secretary I - Contract Supplemental Questionnaire

- \* 1. **SPECIAL SKILLS:** The department may require special skills and may request verification (certificates, etc.) at the time of interview. I understand to be considered for a special skill I must complete the supplemental question for that skill (#'s 2-5) *and that the employers listed in the supplemental section must be listed on the experience section of the application.*
- By checking this box I am indicating that I understand the above statements.
2. **BILLING:** *Briefly* describe your experience working with monitoring billing systems and payments, and maintaining application documents. List the employer and dates of this experience. (Employers must also be listed in work experience section of application.)
3. **MEDICAL OFFICE/CLINIC:** *Briefly* describe your experience verifying insurance, processing claims, and claims resolution. List the employer and dates of this experience. (Employers must also be listed in work experience section of application.)
4. **PERSONAL COMPUTER APPLICATIONS:** Provide the months of experience, skill level (beginner, intermediate, advanced), and reason for using each of the following:
- Word
  - Excel
  - Access
  - Power Point
  - Publisher
- (Example: Word - 5 years - Advanced - Compose letters and memos, flyers)*
5. **ELDERLY and DISABLED HOME CARE NEEDS:** *Briefly* describe your experience with elderly and disabled home care needs and issues. List employer and dates of employment.
- \* 6. Have you previously passed the San Bernardino Human Resources Spanish screening exam?
- Yes   No
- \* 7. **I understand that I cannot update my application once I have submitted it.** Therefore, I have completed ALL sections and **provided full descriptions of my duties and responsibilities** for each employer, and have fully reviewed my answers to all questions on the supplemental prior to submitting my application. *(Do not refer to a resume or other documentation in lieu of completing the employment history section; they will not be reviewed or considered.)*
- I understand.
- \* Required Question