



## EMPLOYMENT APPLICATION

Administration Offices  
 -1355 3<sup>rd</sup> Ave., Chula Vista, CA 91911-  
 -800 W. Los Vallecitos Blvd. Ste. J, San Marcos, CA 92069-

HUMAN  
 RESOURCES  
 DEPARTMENT

FOR DEPARTMENT USE ONLY:  
 DATE:

<b>INSTRUCTIONS: READ CAREFULLY</b> - ANSWER ALL QUESTIONS. IT IS IN YOUR BEST INTEREST TO INCLUDE A COMPLETE AND CURRENT STATEMENT OF YOUR WORK HISTORY AND QUALIFICATIONS. ANY FALSE STATEMENT OR ANSWER, OR OMISSION, MAY BE CAUSE FOR REJECTION OF THE APPLICATION, OR FOR DISCHARGE AFTER APPOINTMENT. PLEASE PRINT IN INK. DO NOT MODIFY FORMAT. A RESUME MAY BE ATTACHED BUT WILL NOT BE ACCEPTED IN LIEU OF A COMPLETED APPLICATION.	SOCIAL SECURITY NO.  -        -
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LAST NAME	FIRST NAME	MIDDLE INIT.	POSITION YOU ARE APPLYING FOR
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CURRENT STREET ADDRESS	BUSINESS TELEPHONE (    )    -    X	HOME TELEPHONE (    )    -
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CITY	STATE	ZIP CODE	EMAIL ADDRESS	ALTERNATE TELEPHONE (    )    -
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MAILING ADDRESS (If different from above)	ARE YOU: 18 YEARS OF AGE OR OLDER?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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CITY	STATE	ZIP CODE	AUTHORIZED TO ACCEPT LEGAL EMPLOYMENT IN THE U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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LIST DRIVER'S LICENSE OR OTHER LICENSES/CERTIFICATES REQUIRED BY THE JOB ANNOUNCEMENT:

LANGUAGE SKILLS (OTHER THAN ENGLISH):  
 LANGUAGE:     SPEAK     READ     WRITE    ADDITIONAL LANGUAGE:     SPEAK     READ     WRITE

TYPING SKILLS: APPROX. TYPING SPEED    ___ WPM APPROX. KEYBOARD SPEED    ___ SPM <i>(Clerical Applicants only)</i>	PROFICIENCY IN MICROSOFT SERIES (Mark as many that apply & select proficiency) <input type="checkbox"/> ACCESS <input type="checkbox"/> POWERPOINT <input type="checkbox"/> EXCEL <input type="checkbox"/> PUBLISHER <input type="checkbox"/> OUTLOOK <input type="checkbox"/> WORD
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EDUCATION	NAME AND ADDRESS	YEARS COMPLETED	DID YOU GRADUATE?	DIPLOMA AWARDED OR GED CERTIFICATE
<b>HIGH SCHOOL</b>			<input type="checkbox"/> YES <input type="checkbox"/> NO	

UNIVERSITIES, COLLEGES, VOCATIONAL AND/OR TRADE SCHOOLS ATTENDED (List most recent attendance)	CREDITS COMPLETED Sem./Qtr. Units	UNITS COMPLETED IN MAJOR	MAJOR SUBJECT FIELD OF STUDY	DEGREE AWARDED/ CERTIFICATE
College or University:				YES <input type="checkbox"/> NO <input type="checkbox"/>
Location/Campus:				<input type="checkbox"/> <input type="checkbox"/>
College or University:				YES <input type="checkbox"/> NO <input type="checkbox"/>
Location/Campus:				<input type="checkbox"/> <input type="checkbox"/>
College or University:				YES <input type="checkbox"/> NO <input type="checkbox"/>
Location/Campus:				<input type="checkbox"/> <input type="checkbox"/>

**EQUAL OPPORTUNITY**

It is the fundamental policy of MAAC to provide equal employment opportunity to all persons regardless of race, creed, color, gender, marital status, sexual orientation, age, national origin, ancestry, physical or mental disability, or cancer-related medical condition. In addition to the principles of non-discrimination, MAAC is a drug-free and smoke-free workplace.





## Human Resources Department

### **AUTHORIZATION TO RELEASE INFORMATION**

It is the policy of MAAC to conduct reference checks for all candidates for employment. Some positions may be subject to a live-scan background check with the Police Department and the FBI or any other required governmental agency.

A photocopy of this signed Authorization is to be considered valid as an original. **Your signature below indicates your agreement with and acknowledgement of the following:**

*As an applicant for employment with MAAC, I authorized my current and previous employers and work associates (including, but not limited to, supervisors, colleagues and subordinates), to release to MAAC any reference information in my personnel records or files (e.g. applications for employment, time and sick leave records, vacation records, performance evaluations), academic records (e.g. transcripts, certificates credentials, etc.), and information related to my work performance and work-related personal characteristics (e.g. my character, dependability, honesty, integrity, ability to work under pressure, interpersonal skills, and professional reputation among co-workers).*

*I expressly and without reservation waive my right to review the information collected in the reference checks.*

*MAAC will maintain reference information in the strictest confidence and solely for the purposes of the recruitment for which I have applied, and that information obtained during reference checks will not be provided to anyone outside the selection process.*

*IN EXECUTING THIS AUTHORIZATION, I FULLY AND COMPLETELY RELEASE ALL PRESENT AND PAST EMPLOYERS AND THEIR EMPLOYEES, MAAC AND ITS EMPLOYEES, AND ALL OTHER PERSONS AND ENTITIES FROM LIABILITY FOR ANY DAMAGE, INCLUDING TO THE FULL EXTENT ALLOWED BY LAW, LIABILITY UNDER CALIFORNIA CIVIL CODE SECTIONS 45 AND 46 AND CALIFORNIA LABOR CODE SECTION 1054, OR ANY SIMILAR LAWS OF OTHER STATES OR POLITICAL ENTITIES, WHICH MAY RESULT FROM FURNISHING INFORMATION WHICH I AM PERMITTING TO BE RELEASED BY WAY OF THIS AUTHORIZATION.*

*I HAVE CAREFULLY READ AND UNDERSTAND ALL OF THE PROVISIONS OF THIS AUTHORIZATION, AND HAVE VOLUNTARY AND WITHOUT COERCION OF DURESS AGREED TO AND SIGNED THIS AUTHORIZATION.*

\_\_\_\_\_  
Applicant's Full Name (Print)

\_\_\_\_\_  
Other Last Names You Have Used (if applicable)

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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#### **HOW DID YOU LEARN ABOUT THIS JOB?**

MAAC Human Resources Office

Employee Referral \_\_\_\_\_  
(Name of Employee)

Community Agency \_\_\_\_\_  
(Name of Agency)

Newspaper Ad \_\_\_\_\_  
(Name of Paper)

Website \_\_\_\_\_  
(Name of Website)

Other \_\_\_\_\_





Maximizing Access for the  
Advancement of our Communities

## Applicant Self-Identification Form

<b>Name:</b>	
<b>Position applied for:</b>	<b>Date:</b>

MAAC Project is a government contractor, as such; we are subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, we ask all employees to voluntarily self-identify their ethnicity, gender, disability status and veteran status. Submission of this information is voluntary and refusal to provide it will not subject employees to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

<p><b><u>Gender</u></b></p> <p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> Decline to self-identify</p> <p><b><u>Ethnicity</u></b></p> <p><input type="checkbox"/> <b>Hispanic or Latino</b> - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.</p> <p><input type="checkbox"/> <b>White (Not Hispanic or Latino)</b> - A person having origins in any of the original peoples of Europe, the Middle East or North Africa.</p> <p><input type="checkbox"/> <b>Black or African American (Not Hispanic or Latino)</b> - A person having origins in any of the black racial groups of Africa.</p> <p><input type="checkbox"/> <b>Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)</b> - A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.</p> <p><input type="checkbox"/> <b>Asian (Not Hispanic or Latino)</b> - A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.</p> <p><input type="checkbox"/> <b>American Indian or Alaska Native (Not Hispanic or Latino)</b> - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.</p> <p><input type="checkbox"/> <b>Two or More Races (Not Hispanic or Latino)</b> - All persons who identify with more than one of the above races.</p> <p><input type="checkbox"/> Decline to identify</p> <p><input type="checkbox"/> Other _____</p>	<p><b><u>Disability Status</u></b></p> <p><input type="checkbox"/> <b>Individual with a Disability Status Code</b> – An individual with a disability is a person who has a physical or mental impairment which substantially limits one or more of such person's major life activities, or who has a record of such impairment.</p> <p><b><u>Veteran Status</u></b></p> <p><input type="checkbox"/> <b>Disabled veteran</b></p> <p>1) A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or</p> <p>2) A person who was discharged or released from active duty because of a service-connected disability.</p> <p><input type="checkbox"/> <b>Recently separated veteran</b> — any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.</p> <p>Separation Date: _____</p> <p><input type="checkbox"/> <b>Armed Forces service medal veteran</b> — any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.</p> <p><input type="checkbox"/> <b>Other protected veteran</b> — a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense.</p>
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Signature: \_\_\_\_\_