



INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR EMPLOYMENT

Please answer all questions fully. **TYPE OR PRINT** in ink.

A separate application must be submitted for each position.

Please complete and return the informational survey on the reverse side of this page.

ALL APPLICATIONS FOR EMPLOYMENT WITH THE SOUTH BAYSIDE SYSTEM AUTHORITY MUST BE ACCOMPANIED BY A CURRENT DEPARTMENT OF MOTOR VEHICLES REPORT OF YOUR DRIVING RECORD. THE REPORT MUST BE DATED THE SAME MONTH AS YOUR APPLICATION. THESE REPORTS MAY BE OBTAINED FROM ANY DMV OFFICE.

APPLICATIONS RECEIVED WITHOUT A CURRENT DMV REPORT WILL NOT BE CONSIDERED.

Applicant **MUST** sign and date page 4. Applications submitted without signature on page 4 will **NOT** be accepted.

All applications become the property of the South Bayside System Authority and will not be returned to the applicant.

Mail or bring this completed application to:

South Bayside System Authority
1400 Radio Road
Redwood City, CA 94065
Telephone: (650) 591-7121

South Bayside System Authority

APPLICANT/EMPLOYEE IDENTIFICATION RECORD

Regulations of the California Fair Employment and Housing Commission require employers to obtain certain information from each employee and job applicant for a particular position. **This form is used to provide each applicant/employee with an opportunity to furnish such information voluntarily.** All information that is provided voluntarily will be used only for record-keeping purposes. Further, such information will be kept separate from the application for employment and an employee's main personnel file or any other records available to persons responsible for personnel decisions. Refusal to supply the information will not result in adverse treatment. The South Bayside System Authority is an equal employment opportunity employer and does not discriminate because of race, color, religion, sex, sexual orientation, pregnancy, national origin, ancestry, age, marital status, physical handicap, or mental condition.

EMPLOYMENT SURVEY

APPLICANT

EMPLOYEE

Name: _____ Date: _____

Position held/Applied for: _____

How did you become aware of the position opening?

(Note specific publication source, if applicable) _____

I agree to supply the requested information: _____

Signature

I do not agree to supply the requested information: _____

Signature

Male

Female

Are you age 40 or over?

Yes

No

ETHNIC ORIGIN – Please check the appropriate box:

- BLACK** (not of Hispanic origin) All persons having origin in any of the Black racial groups
- WHITE** (not of Hispanic origin) All persons having origin in any of the original peoples of Europe, North Africa, the Middle East, or the Indian sub-continent.
- ASIAN or PACIFIC ISLANDERS** All persons having origin in any of the original peoples of the Far East, Southeast Asia, or the Pacific Islands (except the Philippine Islands). This area includes, for example, China, Japan, Korea, the Hawaiian Islands, and Samoa.
- HISPANIC** All persons of Mexican, Puerto Rican, Cuban, Central/South American or other Spanish culture or origin regardless of race.
- AMERICAN INDIAN or ALASKAN NATIVE** All persons having origin in any of the original peoples of North America.
- OTHER** (Please Specify) _____

Please check if any of the following are applicable:

VIETNAM VETERAN

DISABLED VETERAN

DISABLED INDIVIDUAL