

CALIFORNIA JPIA EMPLOYMENT APPLICATION



CALIFORNIA
J · P · I · A

Position applied for:

Return to:

Nikki Salas
Chief Administrative Officer
8081 Moody Street, La Palma, CA 90623
(562) 467-8700 nsalas@cjpia.org

The law prohibits discrimination because of race, color, national origin, religious creed, ancestry, physical or mental disability, medical condition, pregnancy, childbirth or related medical condition, age (40 and over), sexual orientation, sex, gender, gender identity, gender expression, genetic information, military or veteran status, marital status, or any other basis protected by applicable local, state, or federal law. The California Joint Powers Insurance Authority (California JPIA) is an equal opportunity employer. If you need assistance in completing this application, please let us know.

Applicant Information

| First | Middle | Last |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Mailing Address

| City | State | ZIP Code |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

| Telephone Number | Email |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |

Are you legally eligible for employment in the United States? Yes No

Can you perform the essential job duties listed for the job applied for, without limitations? Yes No

If no, what can be done to reasonably accommodate your limitation?

The California JPIA does not discriminate on the basis of age, sex, religion, race, color, marital status, disability, national origin, sexual orientation, gender identity, or any legally protected status and requires affirmative action in the hiring of disabled and veterans.

Have you ever been fired, dismissed, terminated, or had an employment contract terminated from any positions for performance or disciplinary reasons? Applicants who have been rejected during a probationary period, or whose dismissal or termination have been overturned, withdrawn (unilaterally or as part of a settlement agreement), or revoked need not answer "Yes".

Yes No

If "Yes", please provide details on an attached sheet of paper.

Do any of your relatives work for the California JPIA or any of its members? Yes No

If "Yes", what is their name, position, agency with whom they are employed, and relationship to you?

Education

| Name of School | Location | Major Course of Study | Degree, diploma, or certificate awarded |
|----------------|----------|-----------------------|-----------------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Describe any additional job related skills, knowledge, licenses or special training you possess:

Experience

List all jobs you have had in the past ten years (list most recent experience first). Include earlier experience that may qualify you for the position. Please list each change in position, job title, or promotion separately. If qualifying experience is part-time, please list the number of hours you worked per week. Complete this section even if you are attaching a resume.

Employer

Location

Supervisor's Name

May we contact this employer?

Yes

No

Job Title: _____

Number of Direct Reports: _____

Dates of Employment

Starting: _____

Ending: _____

Responsibilities:

| |
|--|
| |
|--|

Reason for Leaving:

| |
|--|
| |
|--|

Experience (Continued)

Employer

Location

Supervisor's Name

May we contact this employer?

Yes

No

Job Title: _____

Number of Direct Reports: _____

Dates of Employment

Starting: _____

Ending: _____

Responsibilities:

Reason for Leaving:

Employer

Location

Supervisor's Name

May we contact this employer?

Yes

No

Job Title: _____

Number of Direct Reports: _____

Dates of Employment

Starting: _____

Ending: _____

Responsibilities:

Reason for Leaving:

Certificant of Applicant

I certify that all statements in this application are true and correct to the best of my knowledge. I agree to submit to a reference check, background check, and pre-placement physical (and drug screen, if applicable) at the California JPIA expense prior to starting work. Upon employment, I agree to furnish proof of age and citizenship as may be required.

I hereby authorize the California JPIA to investigate any information contained on this application and/or my resume. I understand and agree that any and all misstatements or omissions of material facts on any of the foregoing documents may subject me to disqualification and/or dismissal.

I understand this is an "at-will" position with no vested property right to the position. As such, employees of the California JPIA may be terminated at any time, without cause and without right of appeal.

Signature _____ Date _____