



Employment Eligibility Disclosure Form

Employment Type	Location
<input type="checkbox"/> Student Help (Childcare & College Determined Areas)	ARC <input type="checkbox"/>
<input type="checkbox"/> Federal Work Study (Childcare & College Determined Areas)	CRC <input type="checkbox"/>
<input type="checkbox"/> Temporary Classified (Short Term and Special Rate)	FLC <input type="checkbox"/>
<input type="checkbox"/> Employment Service Agreement	SCC <input type="checkbox"/>
	DO/FM/Ethan <input type="checkbox"/>

Please print your name clearly, as it appears on your social security card.

Applicant Name: _____
Last Name, First Name, Middle Initial

Employee ID or Social Security #: _____

The following information must be completed to be considered for employment:

- Have you ***ever been convicted*** of an offense ***other*** than a minor traffic violation (you must disclose convictions that have been dismissed pursuant to Penal Code Section 1203.4; Ed. Code 87008)?
Yes No

If yes, complete reverse side of this form (Form P-881). This employment eligibility disclosure form along with the P-881 will be submitted with your application/employment material to the college checked above and to the Los Rios Community College District Human Resources Office.

Position Requirements:

- Have you been given a job description or had the requirements of the job explained to you?
Yes No
- Do you understand these requirements?
Yes No
- Can you perform the requirements of this job with or without reasonable accommodation?
Yes No

Verification and Release:

By signing this employment eligibility disclosure form, I certify that the information provided by me (as stated on this form, my application and, if applicable, P-881 or attachment(s)) is true, correct and complete to the best of my knowledge and belief. I authorize investigation of all statements contained herein, and I release from liability all persons and organizations furnishing such information. **I understand that any misstatements, omissions or misrepresentation of facts on this form, my application and, if applicable, P-881 or attachment(s) may be cause for disqualification or dismissal.** If offered employment, I will submit verification of my legal right to work in the United States. I will abide by the District's policy on a drug and alcohol-free workplace. Any application, resume or other materials submitted, either solicited or unsolicited, for employment at Los Rios Community College District will become the property of the District and will not be returned to the applicant. Although every attempt is made to maintain confidentiality, applicants should realize that a broad spectrum of campus personnel may be involved in the selection process.

BY SIGNING BELOW, I certify that I have read and agree with these statements.

Applicant's Signature (not valid unless signed)

Date

REPORT OF ARRESTS WHICH LED TO CONVICTIONS FOR CRIME

NAME:

(Please Print)

_____ Last

_____ First

_____ Middle

ADDRESS:

_____ Street

_____ City

_____ State

_____ Zip

PHONE: _____

Explanation:

All employment offers are subject to a background clearance which includes, at a minimum, a careful evaluation of criminal history information to ensure prospective employees are clear of any criminal history that would indicate a risk to the safety or security of the campus community. The District will not deny employment to any applicant solely because the person has been convicted of a crime, however, applicants with convictions for any felony, any drug crimes and sex-related crimes identified in Education Code 87010, 87011, and 88022 are not eligible for employment with the District. Failing to list a conviction at the time the application is submitted may also be grounds for exclusion from employment. For all other crimes, the District will consider the nature, date, and circumstances of the offense as well as whether the offense is relevant to the duties of the position. All applicants who are offered employment will be provided with a LiveScan Request Form and be required to submit fingerprints electronically at a California Department of Justice LiveScan location.

1. Have you ever been convicted (including a plea of guilty or no contest which resulted in a criminal conviction) of a crime? (Exclude misdemeanor convictions for marijuana-related offenses more than two years old; notwithstanding any of the preceding, you should not disclose convictions that are over two years old as of the date that you complete this application for violation of health and safety code sections 11357, 11360, 11365, or 11550, as those statutes relate to marijuana prior to January 1, 1976 or a statutory predecessor to those statutes.)

- YES** If YES, complete #2 and #3 below.
- NO** If NO, go directly to #3 below.

CONVICTIONS YOU MUST INCLUDE:

- You must include a conviction even if you have received a release per section 1203.4 of the Penal Code.
- You must include a conviction for a Vehicle Code violation if it resulted in a misdemeanor or felony conviction (i.e. driving under the influence, hit and run, reckless driving).

CONVICTIONS YOU DO NOT NEED TO INCLUDE:

- You do not need to include a conviction for a Vehicle Code violation classified as an infraction or a parking violation (i.e. speeding, running a stop sign, or a parking violation).
- You do not need to include a conviction for an offense committed as a juvenile if the record has been sealed in accordance with section 1203.45 of the Penal Code.
- You do not need to include a conviction for a marijuana offense if the offense occurred more than two years ago and the record has been expunged or is eligible to be expunged pursuant to section 11361.5 of the Health and Safety Code.

2. List details of each conviction including offense date, arresting agency, code section violated and date probation ends or ended.

Offense Date	Arresting Agency	Code Section Violated	Date Probation Ends or Ended

3. By signing below, I certify that I have listed all of my criminal convictions except for those exempted by law. I understand that if I provide false information about a conviction or fail to disclose a conviction, I will be disqualified for employment. I further understand that if a substantive error or omission of a conviction is revealed after employment begins, I will be subject to immediate dismissal for cause.

Date: _____

Signed: _____