

EMPLOYMENT APPLICATION

4080 Lemon Street, 3rd Floor | P.O. Box 12008 | Riverside, CA 92502-2208 | Phone: 951.787.7141 | Email: hr@rctc.org | Website: rctc.org

APPLIC ANT INFORMATION													
								Today's Date					
Position App			Sala	ry Expectation	(monthly)								
Last Name	e First Name								M.I.				
Street Address						City, ST, Zip							
Primary Phone #				Second Phone									
Email Address													
Are you a cit	citizen of the United States? YES NO				If no, are you authorized to work in the U.S.? NO								
EDUCATION (Applicants may be asked to provide academic records or transcripts.)													
High School/GED/Equivalent YES NO C City/State													
College/University							City/State						
Did you grad	Did you graduate? YES NO Degree						Dis	cipline					
College/University City/State													
Did you graduate? YES NO Degree							Dis	cipline					
Applicable certifications or licenses:													
EMPLOYMENT HISTORY (Include your last seven (7) years of employment history, starting with the most recent and working backwards in time. Incomplete information may disqualify you from further consideration.)													
Company						Phone #							
Address					Supervisor								
Job Title													
Responsibilities													
From To Reason for Leaving													
May we contact your current employer for a reference? YES NO													
Company Phone #													
Address						Supervisor							
Job Title													
Responsibilities													
From	To Reason for Leaving												

May we contact this previous employer for a reference? YES NO								
Company			Phone #					
Address			Supervisor					
Job Title								
Responsibilities								
From	То	Reason for Leaving						
May we contact this previous employer for a reference? YES NO								
Company			Phone #					
Address			Supervisor					
Job Title								
Responsibilities								
From	То	Reason for Leaving						
May we contact this previous employer for a reference? YES NO								
REFERENCES (Please list three professional references)								
Full Name				Relationship				
Company				Phone #				
Email Address	Address							
Full Name				Relationship				
Company				Phone #				
Email Address								
Full Name				Relationship				
Company				Phone #				
Email Address								
DISC LAIMER AND SIG NATURE								
I certify that my answers on this form, and any attachments, are true and complete to the best of my knowledge and belief.								
Applicants may be subject to pre-employment testing including criminal background and credit history checks. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate release. I have reviewed the job announcement for the position for which I am applying, and certify that I am qualified to perform these duties.								
Signature Date								
Print								



Capital Projects Manager- Supplemental Questionnaire

Resumes and applications provide us with useful information but it is also helpful to provide candidates with an opportunity to provide additional information on their experience, interests, skills etc. Please answer each of the questions below to the best of your ability and submit with your application. Thank you for your interest in joining the Riverside County Transportation Commission team of dedicated employees!

- 1. Please describe your experience managing projects on the state highway system. Explain your particular role on the projects and the role of the agency or consultant you worked for.
- 2. Please describe your experience with preparing or responding to Requests for Proposals, and managing consultant contracts either for a public agency or as a consultant.
- 3. Do you currently possess a valid certificate or registration as a Professional Engineer (PE) in the State of California?