



ORANGE COUNTY PUBLIC SAFETY

A TOTAL PUBLIC SERVICE AGENCY

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info_ocps@yahoo.com
1040 E Whittier Blvd, Ste 205,
La Habra, CA 90631
PPO# 16622

EMPLOYMENT APPLICATION

Please print clearly in black or blue ink. Complete all applicable fields. An asterisk (*) identifies required information.

APPLICANT INFORMATION

Legal First Name*	Middle Name	Legal Last Name*
Preferred Name	Primary Phone*	Alternate Phone

Street Address*		
City*	State*	ZIP Code*
Email Address*		

Preferred contact method*

☐ Phone ☐ Text ☐ Email

POSITION AND EMPLOYMENT INFORMATION

Position applied for*

☐ Event Officer ☐ Patrol Officer
☐ Dispatcher ☐ Administrative Support
☐ Other: _____

Employment type desired*

☐ Full Time ☐ Part Time ☐ Temporary ☐ On-Call

Desired Pay: _____ Pay Basis: ☐ Hourly ☐ Annual

AVAILABILITY & RECRUITING INFORMATION

AVAILABILITY

Check every shift you are available to work.

Day	Morning	Afternoon	Evening	Overnight
Monday	☐	☐	☐	☐
Tuesday	☐	☐	☐	☐
Wednesday	☐	☐	☐	☐
Thursday	☐	☐	☐	☐
Friday	☐	☐	☐	☐
Saturday	☐	☐	☐	☐
Sunday	☐	☐	☐	☐

Preferred schedule(s)*

☐ Weekdays
 ☐ Weekends
 ☐ Evenings
 ☐ Nights

Available for overtime, if required?* ☐ Yes ☐ No

Available for holidays, if required?* ☐ Yes ☐ No

Preferred Local Work Area	Available Start Date*
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RECRUITING & EMPLOYMENT ELIGIBILITY

RECRUITING SOURCE AND PRIOR RELATIONSHIP

How did you hear about us?*

- ☐ Company Website ☐ Walk-In ☐ Employee Referral
☐ Advertisement ☐ Other

Referral Name	Where did you see the advertisement or job posting?
If Other, please specify	

Have you worked for Orange County Public Safety before?* ☐ Yes ☐ No

Prior Start Date	Prior End Date
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Do you know anyone who works here?* ☐ Yes ☐ No

Employee Name and Relationship

EMPLOYMENT ELIGIBILITY

Are you legally authorized to work in the United States?* ☐ Yes ☐ No

Federal law requires employers to hire only individuals authorized to be lawfully employed in the United States. OCPS will verify identity and employment authorization after an offer, using documents selected in accordance with federal requirements.

Will you now or in the future require employer sponsorship to work in the United States?*

☐ Yes ☐ No

If hired, can you perform the essential functions of the position, with or without reasonable accommodation?*

☐ Yes ☐ No

Are you under 18 years of age?* ☐ Yes ☐ No

If under 18, can you furnish a work permit? ☐ Yes ☐ No

EQUAL EMPLOYMENT OPPORTUNITY

Orange County Public Safety is an equal opportunity employer. Employment decisions are made without regard to race, color, ancestry, national origin, religion, creed, sex, gender, gender identity, gender expression, sexual orientation, age, disability, medical condition, genetic information, marital status, military or veteran status, or any other protected characteristic under applicable federal, state, or local law. Reasonable accommodation is available to qualified applicants and employees with disabilities, consistent with applicable law.

EMPLOYMENT HISTORY

List work experience with the most recent first.

EMPLOYER 1

Company Name*	Type of Business*
Street Address, City, State, ZIP*	
Company Phone*	Position / Title*
Start Date*	End Date*
Supervisor Name / Title*	Supervisor Phone
Supervisor Email Address	
Reason for Leaving*	May we contact this employer? ☐ Yes ☐ No
Briefly describe your major duties*	

EMPLOYER 2

Company Name*	Type of Business*
Street Address, City, State, ZIP*	
Company Phone*	Position / Title*
Start Date*	End Date*
Supervisor Name / Title*	Supervisor Phone
Supervisor Email Address	
Reason for Leaving*	May we contact this employer? ☐ Yes ☐ No
Briefly describe your major duties*	

EMPLOYMENT HISTORY (CONTINUED)

List work experience with the most recent first.

EMPLOYER 3

Company Name*	Type of Business*
Street Address, City, State, ZIP*	
Company Phone*	Position / Title*
Start Date*	End Date*
Supervisor Name / Title*	Supervisor Phone
Supervisor Email Address	
Reason for Leaving*	May we contact this employer? ☐ Yes ☐ No
Briefly describe your major duties*	

EMPLOYER 4

Company Name*	Type of Business*
Street Address, City, State, ZIP*	
Company Phone*	Position / Title*
Start Date*	End Date*
Supervisor Name / Title*	Supervisor Phone
Supervisor Email Address	
Reason for Leaving*	May we contact this employer? ☐ Yes ☐ No
Briefly describe your major duties*	

EDUCATION & PROFESSIONAL REFERENCES

EDUCATION

Highest level of education completed*

- | | |
|---|--|
| ☐ High School or Equivalent | ☐ Some College |
| ☐ Associate Degree | ☐ Bachelor Degree |
| ☐ Graduate / Professional Degree | ☐ Vocational / Technical Training |
| ☐ Other | |

School / Institution*

Major / Program*

Degree / Diploma / Certificate*

Did you graduate or complete the program?* ☐ Yes ☐ No

PROFESSIONAL REFERENCES

Please provide three professional references. Personal references should be used only when professional references are not available.

Reference 1

Name*	Relationship*	Company*
Phone	Email Address	

Reference 2

Name*	Relationship*	Company*
Phone	Email Address	

Reference 3

Name*	Relationship*	Company*
Phone	Email Address	

LICENSES, PERMITS & CERTIFICATIONS

CURRENT CREDENTIALS

Check all current credentials relevant to the position. OCPS will verify credentials before assignment to regulated duties.

Select all that apply

- | | |
|--|---|
| ☐ BSIS Guard Card / Security Guard Registration | ☐ BSIS Exposed Firearms Permit |
| ☐ BSIS Baton Permit | ☐ Chemical Agent / Pepper Spray Training |
| ☐ CPR Certification | ☐ First Aid Certification |
| ☐ FEMA ICS / NIMS Training | ☐ Other |

CREDENTIAL DETAILS

Complete the number and expiration date for each credential selected. Write "N/A" when a credential does not have a number or expiration date.

CA Guard Card / Security Guard Registration

Number	Expiration Date
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BSIS Exposed Firearms Permit

Number	Expiration Date
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BSIS Baton Permit

Number	Expiration Date
--------	-----------------

Chemical Agent / Pepper Spray Training

Number	Expiration Date
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CPR Certification

Credential Name / Number	Expiration Date
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First Aid Certification

Credential Name / Number	Expiration Date
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FEMA ICS / NIMS Training

Credential Name / Number	Expiration Date
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Other Credential

Credential Name / Number	Expiration Date

Additional credential information or notes

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APPLICANT CERTIFICATION

CERTIFICATION

_____ I certify that the information I have provided in this application and any related materials is true, complete, and accurate to the best of my knowledge.

_____ I understand that any false statement, omission, or misrepresentation may result in refusal to hire or, if hired, separation from employment.

_____ I authorize OCPS to verify information related to my qualifications, employment history, education, licenses, certifications, and references, consistent with applicable law.

_____ I understand that this application does not create an employment contract or guarantee employment for any specific duration.

_____ If hired, I understand that employment with OCPS is at will, meaning either I or OCPS may terminate the employment relationship at any time, with or without cause or notice, subject to applicable law.

_____ I understand that OCPS complies with the California Fair Chance Act and will not seek or consider criminal history information before a conditional offer of employment, except as permitted by law.

Applicant Signature*

Date*

Printed Legal Name*

INTERNAL PROCESSING - DO NOT COMPLETE

Received By

Date Received

Position Reviewed For

Application Status

CALIFORNIA APPLICANT PRIVACY NOTICE

Orange County Public Safety ("OCPS," "we," "us," or "our") provides this notice to explain how we collect, use, retain, and disclose personal information about California job applicants and candidates. This notice applies to information collected during recruiting, application review, interviewing, hiring, credential verification, and related employment-evaluation activities.

INFORMATION WE MAY COLLECT

- Identifiers and contact information, including name, address, telephone number, email address, signature, and application identifiers.
- Professional and employment information, including employment history, job titles, duties, supervisors, work experience, references, availability, and preferred work location.
- Education and training information, including schools, training providers, programs, degrees, certificates, and qualifications.
- License and credential information, including BSIS registrations and permits, CPR or first-aid certifications, and other job-related credentials.
- Internet or electronic activity associated with an online application, including submission dates and times, device or browser information, IP address, and system-security logs.
- Protected classification or sensitive personal information when voluntarily provided, required by law, or lawfully collected for equal-employment, accommodation, work-authorization, or post-offer screening purposes.

OCPS will not request criminal-history information, Social Security numbers, dates of birth, driver-license numbers, or medical information through the initial application unless collection is legally permitted and appropriate for the applicable stage of the hiring process.

SOURCES OF INFORMATION

We may collect information directly from you and, where permitted, from professional references, prior employers, educational or training institutions, licensing agencies, public records, government credential databases, and authorized background-screening providers. Any legally required disclosures and authorizations will be provided before applicable background screening is conducted.

HOW WE USE APPLICANT INFORMATION

- Receive and process employment applications.
- Evaluate qualifications, experience, availability, and suitability for a position.
- Communicate with applicants and arrange interviews.
- Verify employment history, references, education, training, licenses, and credentials.
- Conduct legally permitted post-offer screening.
- Meet legal, regulatory, licensing, safety, and recordkeeping obligations.
- Protect OCPS, its employees, applicants, clients, systems, and property.
- Establish, exercise, or defend legal claims.
- Administer and improve recruiting and application processes.

HOW INFORMATION MAY BE DISCLOSED

We may disclose applicant information to authorized OCPS personnel and, when reasonably necessary and legally permitted, to service providers, professional advisers, credentialing or licensing agencies, background-screening providers, government agencies, and clients involved in evaluating job-related assignment requirements. We may also disclose information when required or permitted by law.

RETENTION

OCPS generally retains applicant and hiring records for at least four years from the applicable application or personnel action, or longer when reasonably necessary to comply with legal obligations, complete an active hiring process, respond to an audit or investigation, resolve a dispute, or establish or defend legal claims. Information collected for post-offer screening may be subject to different legally required retention periods. Information will not be retained longer than reasonably necessary for the disclosed purposes.

CALIFORNIA APPLICANT PRIVACY NOTICE (CONTINUED)

CALIFORNIA PRIVACY RIGHTS

Subject to applicable law and exceptions, California residents may have the right to request access to, correction of, or deletion of certain personal information and to receive information about how their personal information is collected, used, and disclosed. Applicants will not be unlawfully discriminated against for exercising an applicable privacy right.

PRIVACY CONTACT

OCPS Privacy / HR Contact

Email / Phone

PRIVACY ACKNOWLEDGMENT

I acknowledge that I have received, read, and understand the Orange County Public Safety California Applicant Privacy Notice. I understand that this acknowledgment confirms receipt of the notice and does not waive any rights available to me under applicable privacy laws.

Applicant Signature*

Date*

Printed Legal Name*