

CITY OF SANTA MONICA HUMAN RESOURCES DEPARTMENT: CONVICTION INFORMATION QUESTIONNAIRE

Notice: Individuals with conviction records are eligible for employment with the City of Santa Monica and are encouraged to apply. Applications with felony conviction records are referred to the City of Santa Monica Personnel Board for evaluation. This evaluation is to determine whether or not this application may be further considered for this classification only. The evaluation will be based on the nature and duties of the job applied for; the nature, date, and circumstances of the offense; and the applicant's conduct subsequent to the offense. Any omissions are grounds for rejection from consideration for City employment, removal of the applicant's name from the eligible list, or dismissal from City employment. This information will be kept confidential and will not become part of your permanent personnel file, if hired. All employees are fingerprinted and notification of convictions is sent to the Human Resources Department by the State of California, Department of Justice, Bureau of Criminal Identification.

Please respond to the following question:

Have you ever been convicted of a crime (felony, misdemeanor and/or infraction)? ___ **Yes** or ___ **No**

If "YES", you must provide additional information as requested below.

Failure to provide all the required information may result in your application being disqualified.

Please provide the following information pertaining to ALL convictions (felony, misdemeanor and/or infraction), unless judicially dismissed, ordered sealed or expunged pursuant to law. Do NOT list arrests that did not result in a conviction. Do NOT list information regarding any arrest, detention, processing, diversion, supervision, adjudication, or court disposition that occurred in juvenile court. Further, do NOT disclose 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, 11364, 11365 or 11550, as those statutes related to marijuana prior to January 1, 1976, or a statutory predecessor to those statutes.

Date of Conviction	Description of Offense	Code Section Violated	Felony, Misdemeanor, or Infraction
Sentencing Information: (length of jail sentence, time served, monetary fine, terms of parole and/or probation)			
Additional Remarks:			
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Additional Remarks:			

I hereby certify that I have read this notice and that I am aware of my responsibilities in reporting convictions on my application.

Signature of Applicant

Date

Print Name