

AUDITOR EMPLOYMENT APPLICATION

ADM-066 (REV 09/07)

INSTRUCTIONS: Print or type, refer to the explanations and notices on the reverse side. Attach a resume to this application. The resume should include a detailed description of your education, and work experience.

GENERAL INFORMATION

Form with fields for NAME (last, First, M.I.), LAST 4 DIGITS OF SOCIAL SECURITY NUMBER, MAILING ADDRESS, HOME PHONE, (City), (County), (State), (Zip Code), WORK PHONE, EXAMINATION(S) OR JOB TITLE(S) FOR WHICH YOU ARE APPLYING, and E-MAIL ADDRESS. Includes the text 'Auditor Evaluator'.

EDUCATION

All candidates extended an employment offer by the Bureau of State Audits must provide official transcripts from their educational institution(s). Signing this application certifies that you will have completed all required course work prior to your employment with the Bureau of State Audits.

To qualify for an auditor position, you must possess or will graduate with one of the following degrees: (Check all that apply)

- Checkboxes for MBA, MPA, MPP, MS Accountancy

Checkboxes for: A master's degree in a related field that is strong in quantitative analysis with at least nine semester units of college level course work in quantitative subjects such as statistics and economics; or a graduate law degree and nine semester units of college level course work in quantitative subjects such as statistics and economics.

Checkboxes for: BS, Business Administration-Accountancy, BS, Business Administration, BS, Economics. Note: All candidates with a bachelors degree must meet the minimum unit requirement as listed below.

Checkboxes for: A Bachelor's degree with a minimum of 39 semester units (59 quarter units) of business-related courses, which include the following:

Minimum Unit Requirement:

- a minimum of 6 semester units (9 quarter units) in Accounting, or 6 semester units (9 quarter units) in Economics, or 6 semester (9 quarter units ) in Financial Management.
• a minimum of 6 semester units (9 quarter units) in Written/Oral Communications.
• a minimum of 9 semester units (14 quarter units) in Quantitative courses (i.e., mathematics, statistics, etc.)
• a minimum of 18 semester units (28 quarter units) in business-related courses.

EMPLOYMENT

- A. Do you need special accommodations to participate in an interview or a written test? YES NO
B. Have you ever been fired, dismissed, terminated, or had an employment contract terminated from any position for performance or for disciplinary reasons? YES NO
C. Are you now employed by the State of California? YES NO

(Department)

(Subdivision)

(Current Classification)

CERTIFICATION ( Important-please read and sign below )

I certify under penalty of perjury that the information I have entered on this application is true and complete to the best of my knowledge. I further understand that any false, incomplete or incorrect statements may result in my disqualification from the examination/selection process or dismissal from employment with the State of California. For the purpose of substantiating the legitimacy and completeness of information provided to the Bureau of State Audits, I authorize the employers and educational institutions identified in this application to release any information they may have concerning my employment or education. I further understand that the Bureau of State Audits may conduct a background check through the California Department of Justice and require fingerprinting to be completed as part of the employment process.

SIGNATURE

DATE

**AUDITOR EMPLOYMENT APPLICATION**

ADM-066 (REV. 09/07)

**INSTRUCTIONS**

Read the following instructions carefully before completing this Application. Please complete the Application on a typewriter or personal computer or print in ink. All questions must be answered completely and accurately, except as noted. You may be disqualified for any false or misleading statements or for omitting information. The information you furnish will be used to determine your eligibility and/or may be the basis for arriving at your final rating in an examination. During the course of an examination, you may be requested to provide additional information regarding your qualifications, and health/medical background.

**Education**—You must furnish a complete record of your training and educational background upon request. Please read the Requirements section of the examination bulletin carefully for any special educational requirements. If more space is needed, attach additional sheet(s).

**Employment**

All applicants must answer the employment questions.

**A.** *Reasonable Accommodations* will be provided to applicants who need assistance to take an interview or written test. If you check “Yes” you will be contacted via telephone or mail to make specific arrangements.

**B.** *Employment*—You must answer ‘Yes’ if you have ever, because of poor performance or misconduct, been fired, dismissed, or terminated from a job, or had an employment contract terminated. Explain any “Yes” answers on the back of the application or on a separate sheet. Include the facts in brief, the grounds for any action taken against you, and the circumstances under which you left the position. In completing this application, you do not need to answer “Yes” to the questions if:

- you have been rejected during a probationary period; or
- your employer withdrew the firing, dismissal, termination, or contract termination (either voluntarily or as part of a settlement agreement); or
- a court or administrative agency overturned or revoked the firing, dismissal, termination, or contract termination.

If asked about past employment history by a prospective employer during the hiring process or probationary period, applicants are required to tell the truth regarding any firing, dismissal, termination, contract termination or rejection during probationary period, whether or not the action was overturned, revoked, or withdrawn (either voluntarily by the employer or, as part of a settlement agreement). Applicants are also required to provide factually correct information on their resume.

**C.** *Current State Employee*—Use the space provided to supply the information.

**If Veteran’s Preference Points** are being granted in this examination and if you qualify, you must apply before the scheduled examination on Application for Veteran’s Preference Form SPB-1093.

**NOTE:** Your completed Application and other examination related information submitted to the department administering this examination becomes confidential information and the property of the State of California as provided by Government Code Section 18934. This Application and other confidential information **will not be returned**; therefore, we recommend that you keep a copy of your completed Application for your personal records. Your rights to inspect your examination papers are set forth in Sections 186-189 of Title 2 of the California Code of Regulations, which can be accessed on the State Personnel Board’s website at [www.spb.ca.gov](http://www.spb.ca.gov).

**Signature**—Your signature and the date signed is required. If the Application is not signed, it may be rejected.

**EXAMINATION AND/OR  
EMPLOYMENT APPLICATION**

STD. 678 (REV. 12/2001)

**EQUAL EMPLOYMENT OPPORTUNITY  
(For Examination Use Only)**

**APPLICANT:** To assist the State of California in its commitment to Equal Employment Opportunity, applicants are asked to voluntarily provide the following information. This questionnaire will be separated from the application prior to the examination and will not be used in any employment decisions. Government Code Section 19705 authorizes the State Personnel Board to retain this information for research and statistical purposes.

LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER \_\_\_\_\_

AGE	GENDER
<input type="checkbox"/> (1) UNDER 21 <input type="checkbox"/> (3) 21 - 39 <input type="checkbox"/> (6) 40 - 69 <input type="checkbox"/> (7) 70 AND OVER	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE

**Ethnic Category (Please check the box that best describes your race/ethnicity.):**

(7) **AMERICAN INDIAN OR ALASKAN NATIVE**-- Persons having origins in any of the tribal peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

ENTER TRIBAL IDENTIFICATION OR AFFILIATION \_\_\_\_\_

(2) **ASIAN**-- Persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent. This includes China, Japan, and Korea.

(1) **BLACK**-- Persons having origins in any of the black racial groups of Africa.

(8) **FILIPINO**-- Persons having origins in any of the original peoples of the Philippine Islands.

(4) **HISPANIC**-- Persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

(6) **PACIFIC ISLANDERS**-- Persons having origins in the Pacific Islands, such as Samoa.

(5) **WHITE**-- Persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

**Check if:**

(3) **OTHER (Specify)** \_\_\_\_\_

(Y) **DISABLED**--A person with a disability is an individual who: (1) has a physical or mental impairment or medical condition that limits one or more life activities, such as walking, speaking, breathing, performing manual tasks, seeing, hearing, learning, caring for oneself or working; (2) has a record or history of such impairment or medical condition; or (3) is regarded as having such an impairment or medical condition.

**MILITARY**--A military veteran; a widow or widower of a veteran; or a spouse of a 100% disabled veteran.

**How did you learn of this Examination?**

<input type="checkbox"/> TELEPHONE JOB LINE	<input type="checkbox"/> WORD OF MOUTH	<input type="checkbox"/> INTERNET
<input type="checkbox"/> ADVERTISEMENT IN _____	<input type="checkbox"/> EXAMINATION BULLETIN LOCATED AT _____	

**THANK YOU FOR COMPLETING THIS QUESTIONNAIRE**