



STATE OF COLORADO
EMPLOYMENT APPLICATION FORM B
SUBMIT COMPLETED FORM TO AGENCY LISTED IN THE JOB ANNOUNCEMENT

PLEASE TYPE OR PRINT IN BLACK INK

Enter below the *State Job Title, Class Code and Position Number (if one appears)* as listed on the job announcement to which you are responding. Application Form B is accepted only for an announced position. Additional instructions on following page.

State Job Title / Working Title:				Class Code:				Position / Announcement Number:			
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Social Security Number: Please fill in the shaded boxes to the right with your SSN					-						
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Name (Last, First, Middle Initial, Suffix):

Mailing Address (Street, Apt/Unit or P.O. Box):

City	State	Zip Code
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Home Phone Number: ()	Work Phone Number: ()
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VOLUNTARY INFORMATION

The data requested in this section are voluntary and requested for statistical reasons for federal record keeping purposes only, **CFR 29-4.B**. This section is not considered a part of the application. This sheet will be permanently separated from the rest of your application. It is the policy of the state, as expressed in the Constitution, Statutes, Governor's executive order and Personnel Board rules, that the work force of the state reflect the diversity of the state.

ETHNICITY: Check the ethnic group with which you identify. Check only one.

1 - Black, Non-Hispanic 2 - American Indian 3 - Asian/Pacific Islander 4 -Hispanic 5 - White, Non-Hispanic

GENDER: Check the appropriate gender: Male Female

BIRTH DATE: Some state jobs have a legally required minimum age. Please provide your BIRTH DATE only if you want to be considered for one of those jobs.

Month: _____ Day: _____ Year: _____

VETERAN'S PREFERENCE INFORMATION: State of Colorado agencies may be government contractors subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974 ("VEVRA"), as amended, which requires government contractors to take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam era covered by VEVRA. Under the Colorado Constitution, art. XII, sec.15, honorably discharged veterans, and surviving spouses, are eligible for preference points when taking a competitive examination, other than a promotional examination.

If you are an honorably discharged veteran or unremarried widow/widower of a veteran who served on active duty in the United States Armed Forces during one of the periods for which the federal government awards veteran's preference points, you may claim points on your competitive examination for a position with the state personnel system. Please attach a copy of a DD214 form and other supportive documentation for veteran's points to be awarded to your final passing score(s). If you are a current or previous state employee you cannot claim veteran's preference points.

Check the appropriate veterans status:

1 -Disabled Veteran 2 - Veteran 3 -Disabled Vietnam Era Veteran 4-Vietnam Era Veteran 5-Widow-Widower

COLORADO IS AN EQUAL OPPORTUNITY EMPLOYER

INSTRUCTIONS FOR COMPLETING APPLICATION FORM B

1. You must be a resident of Colorado at the time of application unless otherwise stated on the job announcement that non-residents (residency waiver) may apply.
2. A separate application form must be submitted for each job announcement to which you are responding. Be sure to include supporting documentation if requested on the announcement.
3. Write the state job title, class code and position number (if one appears) exactly as stated on the announcement. Write your name and Social Security Number on each page where indicated.
4. Review the announcement carefully to determine if you meet the minimum qualifications as announced. Do not apply if you do not meet the stated qualifications.
5. It is your responsibility to assure that your application is **received** by the closing date in the location stated in the announcement. Late applications may not be considered.
6. This application form and all attached documents are official records of the State and cannot be returned. All information on pages 3-6 of this application, with the **exception of Social Security Number and shaded areas** is considered public information under the State of Colorado Public Records Act.
7. Applicants are notified by mail of their status in the exam process. It is the applicant's responsibility to notify the agency to which this application is submitted of any change of address. Failure to do so may result in improper notification for examinations, failure to be notified of job interview or removal of your name from an eligible list.
8. If you are a current or previous permanent employee in the State Personnel System and would like to be considered for transfer or reinstatement, complete this application form and write TRANSFER or REINSTATEMENT across the front page. Submit the completed form to the agency to which you are interested in transferring or being reinstated.

NOTE: TO BE CONSIDERED AS A TRANSFER/REINSTATEMENT, YOU MUST BE/HAVE BEEN AT THE SAME LEVEL OR ABOVE AND MEET THE MINIMUM REQUIREMENTS AS STATED ON THE ANNOUNCEMENT.

Name (Last, First Middle Initial, Suffix):	Social Security Number:
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COLORADO DRIVER'S LICENSE		
Number:	Class:	Expiration Date:
Endorsements:	Restrictions:	

TYPE OF EMPLOYMENT DESIRED

Check any and all type(s) of employment you would accept:

2 - Full Time
 3 - Temporary
 4 - Part-time
 5 - Shift work
 6 - Night work
 7 - Seasonal
 8 - Nine Months

BACKGROUND CHECK

Many state jobs require a background check such as criminal record, driving record, credit check, etc. Would you be willing to submit to a background check?
 YES
 NO

WORK LOCATIONS DESIRED

Indicate the locations where you will accept employment by placing the **three digit code** for the appropriate city or area in the boxes. The codes are listed below. **ONLY FIFTEEN (15) LOCATIONS MAY BE INDICATED.** Your name will be referred only to positions in the locations you indicated. If you do not accept a position offered in a location you indicate, your name will be removed from consideration for future job openings. The location codes you select on this application apply only to the announcement to which you are responding.

LOCATION CODES:							

DENVER:	860 - NORTHEAST DENVER	861 - NORTHWEST DENVER	812 - DOWNTOWN DENVER	844 - SOUTHEAST DENVER	845 - SOUTHWEST DENVER
201 - AGUILAR	206 - COTOPAXI	211 - GRANEROS CREEK	134 - LOVELAND PASS	569 - ROCKWOOD	839 - ROCKY FORD
401 - AKRON	350 - CRAIG	819 - GREELEY	424 - LYONS	362 - SKULL CREEK	220 - RYE
550 - ALAMOSA	305 - CRAWFORD	820 - GREEN MTN RESVR	560 - MANASSA	564 - SAGUACHE	840 - SALIDA
501 - ALLISON/ARBOLES	554 - CREEDE	313 - GUNNISON	511 - MANCOS	841 - SAN LUIS	565 - SARGENTS
801 - ALMONT	306 - CRESTED BUTTE	314 - GYPSUM	124 - MATHESON	842 - SECURITY	127 - SEDALIA
402 - ANTON	207 - CRIPPLE CREEK	525 - HARTSEL	356 - MAYBELL	128 - SEIBERT	817 - SILVERTHORNE\
551 - ANTONITO	406 - CROOK	414 - HAXTON	425 - MEAD	FRISCO\ DILLON	518 - SILVERTON
802 - ARBOLES	227 - CROWLEY	353 - HAYDEN	357 - MEEKER	829 - MONUMENT	362 - SKULL CREEK
101 - ARRIBA	307 - DE BEQUE	510 - HESPERUS	319 - MESA	566 - SOUTH PARK	221 - SPRINGFIELD
803 - ARVADA	111 - DEER TRAIL	212 - HOLLY	828 - MINTURN	363 - STEAMBOAT SPRINGS	432 - STERLING
804 - ASPEN	810 - DEL NORTE	415 - HOLYOKE	561 - MONARCH PASS	433 - STONEHAM	129 - STRASBURG
403 - AULT	308 - DELTA	821 - HOMELAKE	562 - MONTE VISTA	222 - SUGAR CITY	434 - SUPERIOR
102 - AURORA	817 - DILLON/FRISCO/ SILVERTHORNE	354 - HOT SULPHUR SPRGS	320 - MONTROSE	519 - TELLURIDE	846 - THORNTON
137 - AVON	811 - DINOSAUR	315 - HOTCHKISS	829 - MONUMENT	223 - TRINIDAD	323 - TWIN LAKES
103 - BAILEY	506 - DOLORES	416 - HUDSON	125 - MORRISON	130 - VAIL	567 - VILLA GROVE
301 - BASALT	507 - DOVE CREEK	118 - HUGO	358 - MUDDY PASS	364 - WALDEN	224 - WALSENBURG
502 - BAYFIELD	309 - DOWD JUNCTION	119 - IDAHO SPRINGS	426 - NEDERLAND	435 - WELLINGTON	225 - WESTCLIFFE
503 - BEDROCK	407 - DRAKE	417 - IDALIA	427 - NEW RAYMER	848 - WESTMINSTER	849 - WHEATRIDGE
805 - BELLVUE	112 - DUMONT	509 - IGNACIO	831 - NORTHGLENN	436 - WIGGINS	131 - WINTER PARK
133 - BERTHOUD FALLS	508 - DURANGO	418 - JOES	512 - NORWOOD	324 - WOLCOTT	568 - WOLF CREEK PASS
202 - BEULAH	208 - EADS	419 - JOHNSTOWN	513 - NUCLA	(EAST)	520 - WOLF CREEK PASS
104 - BLACKHAWK	326 - EAGLE	420 - JULESBURG	428 - NUNN	(WEST)	226 - WOODLAND PARK
302 - BLUE MESA	351 - ELK SPRINGS	213 - KIM	833 - ORCHARD	437 - WRAY	365 - YAMPA
404 - BOULDER	113 - EMPIRE	120 - KIOWA	834 - ORDWAY	365 - YAMPA	438 - YUMA
105 - BRECKENRIDGE	815 - ENGLEWOOD	121 - KIT CARSON	429 - OTIS		
601 - BRIGHTON	408 - ESTES PARK	122 - KITTREDGE	514 - OURAY		
806 - BROOMFIELD	132 - EVERGREEN	355 - KREMMLING	430 - OVID		
405 - BRUSH	816 - FAIRPLAY	558 - LA MANGA PASS	515 - PAGOSA SPRINGS		
552 - BUENA VISTA	440 - FLORENCE	822 - LA JARA	835 - PALISADE		
106 - BURLINGTON	556 - FORT GARLAND	216 - LA VETA	321 - PAONIA		
203 - CALHAN	209 - FOWLER	214 - LA JUNTA	322 - PARACHUTE		
204 - CANON CITY	115 - FRANKTOWN	526 - LA VETA PASS	117 - PARKER		
303 - CARBON DALE	817 - FRISCO / DILLON	823 - LAKE GEORGE	218 - PENROSE		
504 - CASCADE MOLAS PASS	SILVERTHORNE	316 - LAKE CITY	837 - PITKIN		
107 - CASTLE ROCK	411 - FT MORGAN	824 - LAKEWOOD	836 - PLATTEVILLE		
304 - CEDAREDDGE	410 - FT LUPTON	215 - LAMAR	563 - PONCHA SPRINGS		
807 - CENTRAL CITY	409 - FT COLLINS	217 - LAS ANIMAS	431 - Poudre RIVER CANYON		
108 - CHEYENNE WELLS	310 - GATEWAY	825 - LATHROP	219 - PUEBLO		
109 - COALCREEK	116 - GEORGETOWN	317 - LEADVILLE	126 - PUNKIN CENTER		
553 - COCHETOPA PASS	412 - GILCREST	123 - LIMON	359 - RABBIT EARS PASS		
197 - COLLBRAN	311 - GLENWOOD SPRINGS	826 - LITTLETON	838 - RAMAH		
205 - COLORADO SPRINGS	818 - GOLDEN	421 - LIVERMORE	360 - RANGELY		
808 - COMMERCE CITY	210 - GRANADA	318 - LOMA	516 - RICO		
809 - CONEJOS	352 - GRANBY	422 - LONGMONT	517 - RIDGEWAY		
110 - CONIFER	312 - GRAND JUNCTION	423 - LOVELAND	361 - RIFLE		
505 - CORTEZ					

Name (Last, First, Middle Initial, Suffix):	Social Security Number:
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LICENSES/CERTIFICATION/REGISTRATIONS

If a license/certificate/registration is required for the job for which you are applying (e.g., Journeyman Plumber, Professional Engineer, etc.) complete the following

Professional/Specialty License Type:	License Number:
Expiration Date:	State and/or Agency Granting License:

LANGUAGE PROFICIENCY

List other language skills you have and your level of proficiency (speak, read, write, etc.).

EDUCATION AND EMPLOYMENT HISTORY

This section must be accurate and complete. The application is used to determine if you meet the minimum qualifications as published in the job announcement. The application may also be used to determine the highest qualified individuals to be invited to the next step in the selection process. Applicants omitting sufficient information may not be invited to the next step of the selection process or may be rejected.

EDUCATION RECORD

High School Graduate: <input type="radio"/> Yes <input type="radio"/> No	Date:	GED: <input type="radio"/> Yes <input type="radio"/> No	Date:
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UNIVERSITY and COLLEGE (UNDERGRADUATE, GRADUATE, POST GRADUATE)

Name:	Location:	Attended: From -To (Mo - Yr)		
Degree Awarded:	Date:	Major Field of Study:	Minor Field of Study:	Total Semester Hours:
Name:	Location:	Attended: From -To (Mo - Yr)		
Degree Awarded:	Date:	Major Field of Study:	Minor Field of Study:	Total Semester Hours:
Name:	Location:	Attended: From -To (Mo - Yr)		
Degree Awarded:	Date:	Major Field of Study:	Minor Field of Study:	Total Semester Hours:

BUSINESS, TRADE, TECHNICAL, VOCATIONAL SCHOOL OR MILITARY TRAINING

Name:	Location:	Attended: From -To (Mo - Yr)		
Title of Program or Subjects Taken:	Total Classroom Hrs:	Cert. Rcvd. <input type="radio"/> Yes <input type="radio"/> No	Date:	
Name:	Location:	Attended: From -To (Mo - Yr)		
Title of Program or Subjects Taken:	Total Classroom Hrs:	Cert. Rcvd. <input type="radio"/> Yes <input type="radio"/> No	Date:	

Name (Last, First, Middle Initial, Suffix):	Social Security Number:
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EMPLOYMENT HISTORY

List your employment history starting with the most recent job, including part-time, temporary, and volunteer jobs. If more than one job was held with a given organization, list each job held as a separate period of employment. Under "Duties", describe clearly the tasks you performed and the nature of your supervisory, technical, or other responsibilities as they relate to the job for which you are applying. Be complete and specific in detailing of duties. Information must be accurate. If it is found that information provided is untrue or falsified, you will not be considered for a job with the State of Colorado and/or may be removed from a job after hire. If you need more space attach a separate sheet of paper using the same format.

EMPLOYER/Kind of Business:	Your Title:	DATES OF EMPLOYMENT
Address (Street, City, State, ZIP Code):		From: Mo Yr
Supervisor Name:	Title:	Phone:
Duties: (List major duties and responsibilities relevant to the job for which applying; be specific)		To: Mo Yr
		Hrs. Per Week:
		Monthly Salary \$
		Number of Employees Supervised:
		Professional:
		Non-Professional:
Reason for leaving or seeking other employment:		

EMPLOYER/Kind of Business:	Your Title:	DATES OF EMPLOYMENT
Address (Street, City, State, ZIP Code):		From: Mo Yr
Supervisor Name:	Title:	Phone:
Duties: (List major duties and responsibilities relevant to the job for which applying; be specific)		To: Mo Yr
		Hrs. Per Week:
		Monthly Salary \$
		Number of Employees Supervised:
		Professional:
		Non-Professional:
Reason for leaving or seeking other employment:		

