



13th District Agricultural Association

Yuba-Sutter Fairgrounds
442 Franklin Avenue Yuba City, CA 95991
Telephone: 530 – 674 – 1280 Fax: 530 – 674 – 2196
Website: www.ysfair.com Email: info@ysfair.com

Temporary/Part-Time Employment Application

Name: _____ Date of Application: _____

Email: _____ Cell Phone: _____

Mailing Address: _____ City/Zip: _____

Emergency Contact: _____ Phone: _____

Are you over the age of 18? Yes _____ No _____

Do you have experience handling cash/making change? Yes _____ No _____

Do you have experience dealing with the public? Yes _____ No _____

Any Certificates? (Forklift Certification, Guard Card, CPR, etc.) Yes _____ No _____

Certification Name/Type _____ Guard Card # _____

How did you hear about employment at the Yuba-Sutter Fair? _____

Previously employed here / another Fairgrounds or State/County/Public Agency: Yes ____ No ____

If yes, original month/year hired and location: _____

Which of the following areas are you interested in applying for: (Please mark your 1st, 2nd, & 3rd choice)

_____ Maintenance _____ Livestock
_____ Security _____ Night Shift
_____ Admissions _____ Office

Please list your qualifications as they apply to the area(s) listed above: _____

Name of Last Employer: _____ Phone Number _____

Professional Reference:

Name _____ Business _____ Phone Number _____

I hereby certify under penalty of perjury that the information is true and accurate to the best of my knowledge. This is a general application and does not guarantee employment with the Yuba-Sutter Fair, 13th DAA. The Yuba-Sutter Fair has a fair labor standards act exemption.

By signing below, you acknowledge and understand the information provided.

SIGNATURE: _____ DATE: _____

The State of California is an equal opportunity employer to all, regardless of age, ancestry, color, disability (mental and physical), exercising the right to family care and medical leave, gender, gender expression, gender identity, genetic information, marital status, medical condition, military or veteran status, national origin, political affiliation, breastfeeding and related medical conditions, and sexual orientation.

OFFICE USE ONLY

Photo ID/SS Card _____ W-4/I-9 _____ Hourly Rate _____ Garnishment _____