

NAME _____

CalSWEC Job Search Documentation Form

(pages 1-3 are Merit Systems Counties)

COUNTY	DATE APPLIED & HOW(in person, internet, mail)	DOCUMENTATION (mailing receipt, email receipt,signature below)	RESULT IF KNOWN	PLAN FOR FOLLOW UP
Alpine				
Amador				
Calaveras				
Colusa				
Del Norte				
El Dorado				
Glenn				
Humboldt				
Imperial				
Inyo				
Lake				

Merit System Counties, continued

COUNTY	DATE APPLIED & HOW(in person, internet, mail)	DOCUMENTATION (mailing receipt, email receipt,signature below)	RESULT IF KNOWN	PLAN FOR FOLLOW UP
Lassen				
Madera				
Mariposa				
Mendocino				
Merced				
Modoc				
Mono				
Monterey				
Napa				

Merit System Counties, continued

COUNTY	DATE APPLIED & HOW(in person, internet, mail)	DOCUMENTATION (mailing receipt, email receipt,signature below)	RESULT IF KNOWN	PLAN FOR FOLLOW UP
Nevada				
Plumas				
San Benito				
Shasta				
Sierra				
Siskiyou				
Sutter				
Tehama				
Trinity				
Tuolumne				

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(below begins non-Merit Systems Counties)

COUNTY	DATE APPLIED & HOW(in person, internet, mail)	DOCUMENTATION (mailing receipt, email receipt,signature below)	RESULT IF KNOWN	PLAN FOR FOLLOW UP
Alameda				
Butte				
Contra Costa				
Fresno				
Kern				
Kings				
Los Angeles				
Marin				
Orange				

Non-Merit System Counties, continued

COUNTY	DATE APPLIED & HOW(in person, internet, mail)	DOCUMENTATION (mailing receipt, email receipt,signature below)	RESULT IF KNOWN	PLAN FOR FOLLOW UP
Placer				
Riverside				
Sacramento				
San Bernadino				
San Diego				
San Francisco				
San Joaquin				
San Luis Obispo				

Non-Merit System Counties continued

COUNTY	DATE APPLIED & HOW(in person, internet, mail)	DOCUMENTATION (mailing receipt, email receipt,signature below)	RESULT IF KNOWN	PLAN FOR FOLLOW UP
San Mateo				
Santa Barbara				
Santa Clara				
Santa Cruz				
Solano				
Sonoma				
Stanislaus				
Tulare				
Ventura				
Yolo				
Yuba				

I certify that all of the information contained in this document is true and correct to the best of my knowledge.

Signature _____

Date _____