



# State of California Application Instructions

Read the following instructions carefully before completing this application. Please complete the application on a 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 apply for a job, 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, your preference regarding work location, shifts, etc.

**Social Security Number (SSN)** – Providing this is voluntary in accordance with the Privacy Act of 1974 (PL 93-579). However, a SSN may be needed to process your application when granting items such as Veterans' Preference, Limited Examination and Appointment Program (LEAP), Career Credits, and/or confirming list eligibility.

**Examination(s) or Job Title(s)** – Provide the title of the position listed on the announcement.

**Question 2** – Must be answered by all applicants. 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. Applicants who have been rejected during a probationary period, or whose dismissals or terminations have been overturned, withdrawn (unilaterally or as part of a settlement agreement) or revoked need not answer "Yes." Explain any "Yes" answers in the Explanations section. Briefly describe the facts, findings, 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 Question 2 if:

you have been rejected during a probationary period;  
your employer withdrew the firing, dismissal, termination, or contract termination (either voluntarily or as part of a settlement); 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contract termination or rejection during probationary period, whether or not the action was overturned, revoked, or withdrawn (either voluntarily by the employer or, as part of a settlement agreement).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 in the Employment History section of the application.

**Question 3** – Must be answered by all applicants. Government Code section 18720.45 requires applicants for state employment to disclose on their application form whether they have entered into any agreement(s) with the state in which the applicant agreed to refrain from seeking or accepting any subsequent employment with the state. You must answer "Yes" to this question if you have ever entered into a written agreement with any department, agency, commission, board,

state employer, or other governmental unit within California state civil service, where one of the terms of the agreement provided that you agreed not to seek or accept subsequent employment with the state or any state agency. A state agency includes any department, agency, commission, board, state employer, or other governmental unit within the California state civil service, but does not include the California State University.

**Question 4** – Must be answered by all applicants. Government Code section 18720.45 requires applicants for state employment to disclose on their application form whether they have entered into any agreement(s) with the state in which the applicant agreed to refrain from seeking or accepting any subsequent employment with the state. You must answer "yes" to this question if you have ever entered into a written agreement with any department, agency, commission, board, state employer, or other governmental unit within the California state civil service, involving an adverse action, rejection on probation, or AWOL termination where one of the terms of the agreement provided that you agreed not to seek or accept subsequent employment with a particular state agency. A state agency includes any department, agency, commission, board, state employer, or other governmental unit within the California state civil service, but does not include the California State University. If you answer "Yes" to this question, please provide the name of the particular agency and the details in the Explanations section.

**Question 10** – If you checked "Yes" and you are not able to attach the Accommodation Request form, you will be contacted via telephone or mail to make specific arrangements.

**Explanations** – Use this section to explain the details of any response that requires additional information. Be thorough, and attach additional sheet(s) if needed.

**Applicant's Signature** – Your signature and the date signed is required. If the hard copy application is not signed, it may be rejected. Electronic submission of your application through a CalCareer Account certifies your application in place of a signature and date signed.

**Education** – You must include a complete record of your training and educational background. Please read the requirements of the examination bulletin for any specific educational requirements. If more space is needed, you may attach additional documentation.

**Licenses** – If the examination bulletin requires a specific license, professional certificate, or membership in a professional organization, list the full name of the license, certificate or organization, the license number, and the official expiration date of the document or membership.

**Employment History and Experience** – You must include a complete list of your paid and/or volunteer work experience **that relates to the qualification requirements specified on the examination bulletin**. List all relevant jobs during the past 10 years, regardless of duration, including part-time and military service. You should also list volunteer experience and jobs if they directly relate to the job for which you are applying. **State employees must list the specific departments for which they worked and indicate the specific civil service class title(s) held.**

**Requesting Veterans' Preference** – If you have not previously applied and been approved for Veterans' Preference, you must complete and submit the Veterans'

Preference Form, CALHR-1093 to the California Department of Human Resources.

**Equal Employment Opportunity Page** – Providing this information is voluntary. This data is only to be used for statistical purposes in evaluating the extent to which the state is complying with state and federal equal employment opportunity and non-discrimination requirements.

**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, it is recommended that you keep a copy of your completed application for your records. Your rights to inspect your examination papers are set forth in Title 2, section 186 -189 of the California Code of Regulations, which can be accessed at Office of Administrative Law website at: [oal.ca.gov](http://oal.ca.gov).

## Information About Disability

**Physical disability** includes but is not limited to having any physiological disease, disorder, condition, cosmetic disfigurement, or anatomical loss that affects one or more of several body systems and limits a major life activity. The body systems listed include the neurological, immunological, musculoskeletal, special sense organs, respiratory, including speech organs, cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine systems. A physiological disease, disorder, condition, cosmetic disfigurement, or anatomical loss limits a major life activity, such as working, if it makes the achievement of the major life activity difficult.

**Mental disability** includes but is not limited to having any mental or psychological disorder or condition, such as intellectual or cognitive disability, organic brain syndrome, emotional or mental illness, or specific learning disabilities, that limits a major life activity, or having any other mental or psychological disorder or condition that requires special education or related services.

**Major life activities** are defined broadly and include physical, mental, and social activities, including but not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, interacting with others, and working. Major life activities include the operation of major bodily functions, including functions of the immune system, special sense organs and skin, normal cell growth, digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, and reproductive functions.

**Major bodily functions** include the operation of an individual organ within a body system.

**An impairment** "limits" a major life activity if it makes the achievement of the major life activity difficult.

**Medical condition** is defined as any health impairment related to or associated with a diagnosis of cancer or a record or history of cancer, or a genetic characteristic.

**Genetic characteristic** is defined as any scientifically or medically identifiable gene or chromosome or an inherited characteristic that could statistically lead to increased development of a disease or disorder.

California Code of Regulations, Title 2, section 11065.

State of California Application

PRINT OR TYPE

APPLICANT'S NAME (Last) (First) (M.I.)		CALCAREER ID
Anuradha Gopinath Ranjith Sreekar S		3689373
MAILING ADDRESS (Number) (Street) (Apt #)		SOCIAL SECURITY NUMBER (Exams Only)
2021 North Beverly Plaza #15		
(City)	(County)	(State) (Zip Code)
Long Beach		CA 90815
E-MAIL ADDRESS	1st TELEPHONE NUMBER	2nd TELEPHONE NUMBER
ranjithsreekarag@gmail.com	(562) 837-7828	
EXAMINATION(S) OR JOB TITLE(S) FOR WHICH YOU ARE APPLYING		PERSONNEL USE ONLY
JC-452453, Primary Position: 525-717-1401-039, INFORMATION TECHNOLOGY ASSOCIATE		

STANDARD EMPLOYMENT QUESTIONS

1. Are you now employed by the State of California? If "Yes," fill in the information below. ☐ Yes ☒ No

Department: \_\_\_\_\_ Subdivision: \_\_\_\_\_

2. Have you ever been fired, dismissed, terminated, or had an employment contract terminated from any position for performance or for disciplinary reasons? If "Yes," give details in the "Explanation" section below and refer to the instructions page for further information. ☐ Yes ☒ No

3. Have you ever entered into any written agreement with a state agency in which you agreed not to seek or accept subsequent employment with the state or any state agency? ☐ Yes ☒ No

4. Have you ever entered into any written agreement with a state agency involving an adverse action, rejection on probation, or AWOL termination, in which you agreed not to seek or accept subsequent employment with a particular state agency? ☐ Yes ☒ No

5. In addition to English, list any other languages you are fluent in:

a. Verbal fluency in \_\_\_\_\_

b. Written fluency in \_\_\_\_\_

ANSWER THE FOLLOWING QUESTIONS ONLY IF THE EXAM BULLETIN OR JOB POSTING REQUIRES THE INFORMATION

6. For typing applicants only: I certify I can type at a speed of \_\_\_\_\_ words per minute. ☐ Yes ☐ No

7. Do you meet the minimum and/or maximum age requirements? ☐ Yes ☐ No

8. Do you possess a valid California Driver License? If "Yes," fill in the information below. ☐ Yes ☐ No

License #: \_\_\_\_\_ Class: \_\_\_\_\_ Restrictions: \_\_\_\_\_

ANSWER THE FOLLOWING QUESTIONS IF APPLYING TO TAKE AN EXAMINATION

9. Enter your preferred county to take the examination, if different from your county of residence: \_\_\_\_\_

10. Do you need an accommodation to take an examination or assessment? If "Yes," complete the Accommodation form. ☐ Yes ☐ No

NOTE: If you are a veteran, widow or widower of a veteran, or spouse of a 100% disabled veteran, you may qualify for Veterans' Preference. For information regarding Veterans' Preference see [www.calcareers.ca.gov](http://www.calcareers.ca.gov) or [www.calvet.ca.gov](http://www.calvet.ca.gov).

EXPLANATIONS: Provide details of any response that requires additional information.

CERTIFICATION – IMPORTANT – READ BEFORE SIGNING – YOUR SIGNATURE IS REQUIRED FOR HARD COPY SUBMISSION

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 process or dismissal from employment with the State of California. I authorize the employers and educational institutions identified on this application to release any information they may have concerning my employment or education to the State of California.

APPLICANT'S SIGNATURE		DATE SIGNED											
APPLICANTS — DO NOT USE THE SPACE BELOW — FOR PERSONNEL USE ONLY													
Classes	01	02	03	04	05	06				Flags _____	FOR PERSONNEL USE ONLY		
WC for Series/Levels										WC _____	STATUS <input type="checkbox"/> Accepted <input type="checkbox"/> REJECTED WC		
RC/Flag for Series/Levels											EXPERIENCE	LICENSE REQUIREMENT	
											EDUCATION	OTHER	
											STAFF	DATE PROCESSED	
CODES <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>													

APPLICANT'S NAME (Last) Anuradha Gopinath	(First) Ranjith Sreekar	(M.I.) S	CALCAREER ID 3689373
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EDUCATION

DID YOU GRADUATE FROM HIGH SCHOOL?  
☒ Yes ☐ No

IF NOT, DO YOU POSSESS A GED OR EQUIVALENT?  
☐ Yes ☐ No

IF NOT, ENTER THE HIGHEST GRADE YOU COMPLETED?  
\_\_\_\_\_

UNIVERSITY OR COLLEGE — BUSINESS, CORRESPONDENCE, TRADE OR SERVICE SCHOOL, NAME AND LOCATION	COURSE OF STUDY	UNITS COMPLETED SEMESTER	UNITS COMPLETED QUARTER	DIPLOMA, DEGREE OR CERTIFICATE OBTAINED	DATE COMPLETED
Anna University Chennai, Tamilnadu, India.	Electronics and Communication	120		BA/BS	12/31/2020
California State University, Dominguez Hills. Carson, California	Computer Science	36		MA/MS	12/19/2024

**LICENSES – LIST APPLICABLE LICENSES AND CERTIFICATES INDICATED IN THE EXAMINATION BULLETIN.**  
(If you are an attorney, please indicate the date you were admitted to the Bar under the Issue Date column, if stated on the examination bulletin.)

LICENSE / CERTIFICATION NUMBER	ISSUE DATE	EXPIRATION DATE	IN THE SPACE BELOW, INDICATE SPECIFIC COURSE REQUIREMENTS NEEDED TO SATISFY REQUIREMENTS FOR THIS EXAMINATION

EMPLOYMENT HISTORY – List relevant paid, military and/or volunteer experience that relate to the qualification requirements. List each job separately.

FROM (MM/DD/YY) 04/01/2023	TO (MM/DD/YY) Present	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable) IT Student Employee	SUPERVISOR NAME Edith Martinez
HOURS PER WEEK 20	COMPANY/STATE AGENCY NAME California State University, Dominguez Hills.		SUPERVISOR PHONE NUMBER (310) 243-2500
TOTAL WORKED	ADDRESS 1000 E Victoria St, Carson, CA 90747		

DUTIES PERFORMED

As an IT Student Assistant, I provide technical support to end-users, troubleshoot hardware and software issues across various platforms, and manage user accounts and access rights. I handle the setup and configuration of devices, ensure network connectivity, and assist with the installation and maintenance of applications. Additionally, I manage and resolve support tickets, provide training and guidance to users, implement security measures such as multi-factor authentication, and collaborate with other IT teams to address complex technical challenges. My role also involves documenting processes, updating system records, and ensuring compliance with IT policies and procedures.

REASON FOR LEAVING

APPLICANT'S NAME (Last) Anuradha Gopinath		(First) Ranjith Sreekar	(M.I.) S	CALCAREER ID 3689373
FROM (MM/DD/YY) 04/02/2022	TO (MM/DD/YY) 07/31/2022	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable) Customer Service Associate		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGENCY NAME Sutherland			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS 16, GST Road, Perungalathur, Chennai – 600 063, Tamil Nadu India			
DUTIES PERFORMED <p>As an Associate-CS (Customer Service), I handle customer inquiries and provide support through various channels such as phone, chat, and email. My responsibilities include managing and resolving customer issues, processing orders and returns, and maintaining accurate records of customer interactions. I also collaborate with internal teams to ensure timely resolutions, verify customer information, and work to enhance customer satisfaction by delivering efficient and effective service. Additionally, I assist in identifying and filtering potential fraud or scam requests and contribute to maintaining the overall quality of customer service operations.</p>				
REASON FOR LEAVING				

FROM (MM/DD/YY) 04/01/2021	TO (MM/DD/YY) 08/31/2021	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable) Customer Service Representative		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGENCY NAME Teleperformance			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS Chennai, Tamil Nadu, India			
DUTIES PERFORMED <p>As a Customer Service Representative, I respond to customer inquiries, provide timely and effective solutions, troubleshoot issues via phone, chat, or email, and manage customer accounts. I also handle ticket creation and management, process orders and returns, verify customer information, filter out potential scam requests, and maintain detailed records of all customer interactions. Additionally, I collaborate with other teams to resolve complex issues and ensure a high level of customer satisfaction through consistent follow-up and proactive communication.</p>				
REASON FOR LEAVING				

APPLICANT'S NAME (Last) Anuradha Gopinath		(First) Ranjith Sreekar	(M.I.) S	CALCAREER ID 3689373
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FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable)	SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGENCY NAME		SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS		
DUTIES PERFORMED			
REASON FOR LEAVING			

FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable)	SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGENCY NAME		SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS		
DUTIES PERFORMED			
REASON FOR LEAVING			

APPLICANT'S NAME (Last) Anuradha Gopinath		(First) Ranjith Sreekar	(M.I.) S	CALCAREER ID 3689373
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS			
DUTIES PERFORMED				
REASON FOR LEAVING				
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS			
DUTIES PERFORMED				
REASON FOR LEAVING				

APPLICANT'S NAME (Last) Anuradha Gopinath		(First) Ranjith Sreekar	(M.I.) S	CALCAREER ID 3689373
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS			
DUTIES PERFORMED				
REASON FOR LEAVING				
FROM (MM/DD/YY)	TO (MM/DD/YY)	TITLE/JOB CLASSIFICATION (Include Range or Level, if applicable)		SUPERVISOR NAME
HOURS PER WEEK	COMPANY/STATE AGENCY NAME			SUPERVISOR PHONE NUMBER
TOTAL WORKED	ADDRESS			
DUTIES PERFORMED				
REASON FOR LEAVING				



## CalHR Privacy Notice on Information Collection

The California Department of Human Resources (CalHR) is committed to the privacy of your personal information. The information requested on this form may include personal information. Under the Information Practice Act of 1977, California Civil Code section 1798.17, agencies/departments that use this form to collect personal information from individuals are required to provide a privacy notice with this form. For more information, you may wish to contact the appointing authority at which you are applying to receive information regarding that appointing authority's privacy policy, and privacy notice on information collection.

### Legal Authority for Collection and Use of Information

CalHR is requesting the information specified on this form pursuant to Government Code sections 8310.5, 11019.11, 12946, 18720, 18720.1, 19233, 19234, 19705, 19790, 19792(h) and the California Code of Regulations, Title 2, sections 599.980, 11013(b).

The information collected will be used for scheduling examinations, determining your eligibility for state civil service, and contacting you. Information will also be used for statistical and analytic purposes, audit purposes and may be disclosed to the appointing authority to which you apply.

Individuals should not provide personal information that is not requested or required.

The submission of all information requested is mandatory unless otherwise noted. If you fail to provide the information requested, CalHR will not be able to determine your eligibility for state civil service employment.

### Disclosure and Sharing

CalHR does not, under any circumstance, sell your electronically collected personal information. In addition, Government Code section 11015.5 (6) prohibits CalHR and all state agencies from distributing or selling any electronically collected personal information, as defined above, about users to any third party without the written permission of the user. Any distribution of electronically collected personal information will be used solely for its intended use. However, we may share your personal information under the following circumstances:

1. To other state departments and third party vendors for administering our human resource responsibilities as required by law;
2. You give us permission and we have your consent; and/or
3. We may release information to a party with a legal authority, such as a subpoena.

### Department Privacy Policy

The information collected by CalHR is subject to the limitations in the Information Practices Act of 1977 and state policy. For more information on how we care for your personal information, please read our Privacy Policy at <http://calhr.ca.gov/pages/privacy-policy.aspx>.

### Access to Your Information

You can view your personal information through your CalCareer account. If you have questions regarding your CalCareer account, you may contact the CalHR Selection Division.

CalHR Selection Division  
1515 S Street, Room, 500N  
Sacramento, CA 95811  
866-844-8671