APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.

(PLEASE PRINT)

Positions(s) Applied For	Date of Application

How Did You Learn About Us?

☐ Advertisement ☐ Relative ☐ Inquiry

☐ Employment Agency ☐ Friend ☐ Other _____

Last Name	First Name	Middle Name

Address *Number*	*Street*	*City*	*State*	*Zip Code*

Telephone Number(s)	Social Security Number (Voluntary)

Best time to contact you at home is: _____:_____ AM / PM

If you are under 18 years of age, can you provide required proof of your eligibility to work?... ☐ Yes ☐ No

Have you ever filed an application with us before?..... ☐ Yes ☐ No

If Yes, give date _____

Have you ever been employed with us before?..... ☐ Yes ☐ No

If Yes, give date _____

Do any of your friends or relatives, other than spouse, work here?..... ☐ Yes ☐ No

Are you currently employed?..... ☐ Yes ☐ No

May we contact your present employer?..... ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Statues?

Proof of citizenship or immigration status will be required upon employment…… ☐ Yes ☐ No

Date available for work ____/____/____ What is your desired salary range? _____

Are you available to work: ☐ Full-Time (Please indicate 1 2 3 shift)

☐ Part-Time (Please indicate Mornings Afternoon Evenings)

☐ Temporary (Please indicate dates available ___/___/___ - ___/___/___)

Are you currently on "lay-off" status and subject to recall?..... ☐ Yes ☐ No

Can you travel if a job requires it?..... ☐ Yes ☐ No

Education

	Name and Address of School	Course of Study	Number of Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

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Education (continued)

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

_____
_____
_____
_____

Describe any job-related training received in the United States military.

_____
_____
_____
_____

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason For Leaving				
2. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason For Leaving				
3. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason For Leaving				
4. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason For Leaving				

If you need additional space, please continue on a separate sheet of paper.

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Employment Experience (continued)

List professional, trade, business or civic activities and offices held.
You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

_____
_____
_____
_____

Additional Information

Other Qualifications
Summarize special job-related skills and qualifications acquired from employment or other experience.

_____
_____
_____
_____

Specialized Skills **(Check Skills/Equipment Operated)**

___Terminal ___ Spreadsheet ___PC/MAC ___Word Processing

Production/Mobile Machinery (list) _____
_____

Other _____
_____

State any additional information you feel may be helpful to us in considering your application.

_____
_____
_____

References

1. _____ (____)_____
(Name) Phone #
_____
(Address)
2. _____ (____)_____
(Name) Phone #
_____
(Address)
3. _____ (____)_____
(Name) Phone #
_____
(Address)

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Applicant's Statement

I certify that answers given herein are true and complete.

I Authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

_____ _____

Signature of Applicant **Date**

An Applicant is ineligible for employment if he/she is a relative of the Mayor or member of the City Council. Relative is defined as follows: Spouse, child, parent, grandparent, sibling, first cousin, and immediate inlaws (same relation to spouse as indicated for employee).

I,_____, am not a relative as described above.
(Name)

Do you have any relatives employed with the city? _____ Yes _____ No

If answered yes, please state the names(s) of the relative(s). _____

_____

_____

FOR PERSONNEL DEPARMENT USE ONLY

Arrange Interview ☐ Yes ☐ No

Remarks _____

_____ _____

INTERVIEWER DATE

Employed ☐ Yes ☐ No Date of Employment _____

Job Title _____ Hourly Rate/Salary _____ Department _____

By_____

NAME AND TITLE DATE

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