

EDUCATION AND TRAINING

School	Name of School / Issuing Agency – City & State	Did You Graduate/ GED (Yes / No)	Degree Received or Years/Hours Completed	Major & Minor Fields of Study
High School or equivalent				<i>(No need to complete this area of study for high school)</i>
Vocational Technical				
College / University				
Other				

LICENSE OR CERTIFICATES

License or Certificate	Issuing State	License or Certificate No.	Expiration Date (if applicable)

EMPLOYMENT RECORD

Beginning with your current or most recent employment, provide complete information. Use additional paper if necessary.

Employer / Company		Address	
Phone	Supervisor	Reason for Leaving	
Dates of Employment From (Mo/Yr) To (Mo/Yr)	Ending Wage/Salary	May we contact this employer? If NO, please explain	
Position Title	List Duties/Responsibilities		
If you had supervisory responsibilities, please indicate how many individuals you supervised: _____ or N/A			

Employer / Company		Address	
Phone	Supervisor	Reason for Leaving	
Dates of Employment From (Mo/Yr) To (Mo/Yr)	Ending Wage/Salary		
Position Title	List Duties/Responsibilities		
If you had supervisory responsibilities, please indicate how many individuals you supervised: _____ or N/A			

Employer / Company		Address	
Phone	Supervisor	Reason for Leaving	
Dates of Employment From (Mo/Yr) To (Mo/Yr)	Ending Wage/Salary		
Position Title	List Duties/Responsibilities		
If you had supervisory responsibilities, please indicate how many individuals you supervised: _____ or N/A			

PROFESSIONAL REFERENCES

List individuals familiar with your work – DO NOT include relatives

Name	Employer / Title	Relationship	Years Known	Provide best contact information – email or phone - include area code for phone contact

Acknowledgement and Authorization

Please read each of the following carefully before signing this application:

I understand and agree that:

1. The City has my authorization to thoroughly investigate my work history; including contacting current and former employers. I will hold no person, corporation, or organization liable for giving or receiving information in this investigation.
2. In consideration of employment, I agree to conform to the rules and regulations of the City and I understand that no representative of the City has any authority to enter into any agreement, oral or written, for employment for any specified period of time or to make any agreement or assurances contrary to City policy.
3. The City is an equal opportunity employer. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state, or federal law.
4. As part of the City employment process, the City may conduct a background check to confirm the accuracy of information supplied on this application. By signing this application, I knowingly and voluntarily authorize such investigation upon receiving a conditional offer of employment.
5. I understand that passing pre-employment screenings, including drug and alcohol screening, fitness testing or psychological screening may be a requirement for some positions within the City. I understand that if a conditional offer of employment is given for a position with any of these requirements, a satisfactory completion of such pre-employment testing is considered a pre-requisite for qualifying for employment.
6. I further knowingly and voluntarily acknowledge that should any authorized background investigation produce omitted disclosure, intended or unintended, my application may be rejected.
7. I have read and agree to the above and hereby certify that the information provided in this employment application, including any additional information attached hereto, as well as any supplied during the hiring process, is true and complete. I further acknowledge that this is an application for employment and is not an offer of employment.

UNSIGNED APPLICATIONS WILL BE DISQUALIFIED.

Applicant's Signature:	Date:
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