

## EMPLOYMENT APPLICATION

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the applicant and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for	or			Date of application/					
Referral Source:	Adver	tisement	Employee	Relative	Government En	ployment			
	Walk-	in	Private Em	ployment Agency	Other				
Type of employment	desired:	Full-time	Part-time	Temporary	Seasonal				
Name						36.11			
	Last			First		Middle			
Address					ocial Security #				
Street		City	State	Zip Code					
Home Phone #		Cell Ph	one #	E-r	nail address				
May we contact you						Yes	No		
If yes, work number a	and best tim	ne to call							
If necessary; best tim	e to call you	u at home is							
If you are under 18 as	nd it is requ	ired, can you fu	ırnish a work p	permit?		Yes	No		
Have you submitted a	an applicatio	on before?				Yes	No		
Are you legally eligib	ole for empl	oyment in this	country?			Yes	No		
Date available for wo	ork/	/	What is your	desired salary rang	ge?				
Will you travel if the	job require	s it?				Yes	No		
Are you able to meet	the attenda	nce requiremen	ts of the position	on?		Yes	No		
Will you work overti	me if requir	red?				Yes	No		
Have you ever been o	convicted of	f a crime?				Yes	No		
If yes, please provide Answering "yes" to these que rehabilitation and position ap	estions does not	constitute an automa	tic bar to employme	nt. Factors such as date of	of the offense, seriousness	and nature of the violat	ion,		
	•					a.			
Driver's license num	ber it drivin	ig is an essentia	I job function_			State			

## **Employment History**

Starting with your most recent emplo	yer, assignments or volunt	teer activities, provide the	following infor	mation.	
Employer	Telephone #	From: Date Employed	Month Year	To: Month Year	
Street Address	City	State		Compensation (Starting)	
Starting Job Title / Final Job Title				\$ per	
Immediate Supervisor and Title					
Reason for Leaving				Compensation (Final)	
May we contact for reference? Yes	No			\$ per	
Summarize the type of work performed an	nd job responsibilities				
Employer	Telephone #	From: _Date Employed_	Month Year	To: Month Year	
Street Address	City	State		Compensation (Starting)	
Starting Job Title / Final Job Title				\$ per	
Immediate Supervisor and Title					
Reason for Leaving				Compensation (Final)	
May we contact for reference? Yes	No			\$ per	
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Street Address	City	State		Compensation (Starting)	
Starting Job Title / Final Job Title				\$ per	
Immediate Supervisor and Title					
Reason for Leaving				Compensation (Final)	
May we contact for reference? Yes	No			\$ per	
Summarize the type of work performed an					

Skills & Qualifications	Vord	Excel		Access	Pow	erPoint	Internet	
Summarize any special training, ski in the position for which you are ap		es and/or certif	icates that	may quali	fy you as beir	ng able to perform	n job-related functions	
Educational Backgroun			_	·				
Starting with your most recent scho School (Include City & State	Num	ber of Years ompleted	Achi		GPA Class Rank	Major	Minor	
			GE Dipl Deg	oma gree				
			GE Dipl Deg	oma gree				
			GE Dipl Deg	oma				
References List name and telephone number of	three bus	iness/work refe	erences. P	lease do no	ot list family r	nembers.		
Name		Title		Relationship to Candidate		Telephone	Years Known	
Additional Information List professional, trade, business or								
Exclude memberships that would reveal race, color, re Organiza		onal origin, citizenship	o, age, mental or	physical disabi	lities, veteran/reserve	Offices Held	r similarly protected status.	
List special accomplishments, public Exclude memberships that would reveal race other similarly protected status			origin, citizer	nship, age, m	ental or physical	disabilities, veteran/re	eserve national guard or any	
List any additional information you	would lik	ce us to conside	er.					
List names and relationship of any i	elatives c	urrently emplo	yed by the	City of R	ogers			

## APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete, and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration.

I understand that if I am hired. I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (I) cancel further consideration of this application, or (II) immediately discharge me from the employer's service, whenever it is discovered.

## DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

J	certify that	have read,	fully und	derstand an	d accept al	l terms of t	the foregoing A	Applicant Statement.	

	•	-	•			
Signal	ture of Applicant			Date	1	/
Digita	ture or Applicant			 Datt	/	<b>/</b>