



**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.

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|                     |                            |                       |
|---------------------|----------------------------|-----------------------|
| Employer            | <u>Dates Employed</u>      |                       |
|                     |                            | <u>Work performed</u> |
| Telephone Number(s) | <u>Annual Salary/Wages</u> |                       |

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|           |            |
|-----------|------------|
| Job Title | Supervisor |
|-----------|------------|

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Reason for Leaving

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|                     |                            |                       |
|---------------------|----------------------------|-----------------------|
| Employer            | <u>Dates Employed</u>      |                       |
|                     |                            | <u>Work performed</u> |
| Telephone Number(s) | <u>Annual Salary/Wages</u> |                       |

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|           |            |
|-----------|------------|
| Job Title | Supervisor |
|-----------|------------|

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Reason for Leaving

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|                     |                            |                       |
|---------------------|----------------------------|-----------------------|
| Employer            | <u>Dates Employed</u>      |                       |
|                     |                            | <u>Work performed</u> |
| Telephone Number(s) | <u>Annual Salary/Wages</u> |                       |

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|           |            |
|-----------|------------|
| Job Title | Supervisor |
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Reason for Leaving

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

**Additional Information**

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

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**NOTE: If you have a resume' please attach to this application.**

**EDUCATION**

|                 | Name and Address<br>of School | Course<br>Of Study | Years<br>Completed | Diploma<br>Degree |
|-----------------|-------------------------------|--------------------|--------------------|-------------------|
| Elementary      | _____                         |                    |                    |                   |
|                 | _____                         |                    |                    |                   |
| High School     | _____                         |                    |                    |                   |
|                 | _____                         |                    |                    |                   |
| College         | _____                         |                    |                    |                   |
|                 | _____                         |                    |                    |                   |
| Graduate        | _____                         |                    |                    |                   |
|                 | _____                         |                    |                    |                   |
| Other (Specify) | _____                         |                    |                    |                   |
|                 | _____                         |                    |                    |                   |

**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:*

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**Specialized Skills**

List or describe special skills, equipment operated, or software exposure.

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**REFERENCES**

|     |       |         |              |
|-----|-------|---------|--------------|
| 1.) | _____ | _____   | _____        |
|     | Name  | Address | Phone Number |
| 2.) | _____ | _____   | _____        |
|     | Name  | Address | Phone Number |
| 3.) | _____ | _____   | _____        |
|     | Name  | Address | Phone Number |

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 truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

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

I understand that this application remains current for 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. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Mayor.

I also, understand that if I an 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 1-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete, misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

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

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Signature of Applicant

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Date