

# APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
How Did You Learn About Us?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Relative
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Friend
	<input type="checkbox"/> Inquiry
	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip Code
Telephone Number(s)	Social Security Number	

Best time to contact you at home is: \_\_\_\_\_:\_\_\_\_\_ <sup>AM</sup>/<sub>PM</sub>

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 Status  
*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

Have you been convicted of a felony within the last five years? .....  Yes  No  
*A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.*

WE ARE AN EQUAL OPPORTUNITY EMPLOYER



# 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.

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.

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## SPECIALIZED SKILLS (CHECK SKILLS/EQUIPMENT OPERATED)

<input type="checkbox"/> Terminal	<input type="checkbox"/> Spreadsheet	Production/Mobile Machinery (list)	Other (list)
<input type="checkbox"/> PC/MAC	<input type="checkbox"/> Word Processing	_____	_____
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Shorthand	_____	_____
WPM _____	WPM _____	_____	_____
		_____	_____

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

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Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.  YES  NO

## REFERENCES

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

ACKNOWLEDGMENT OF AT-WILL EMPLOYMENT

I UNDERSTAND THAT IF I AM HIRED BY THE CITY OF KEMMERER, MY EMPLOYMENT, COMPENSATION, AND/OR BENEFITS CAN BE TERMINATED WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT THE OPTION OF EITHER THE CITY OF KEMMERER OR MYSELF. I ALSO UNDERSTAND THAT NO EMPLOYEE, MANAGER OR SUPERVISOR OF THE CITY OF KEMMERER HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT OR MAKE ANY PROMISES FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR MAKE ANY STATEMENTS OR PROMISES CONTRARY TO THIS DISCLAIMER, UNLESS SUCH AGREEMENT IS IN WRITING AND SIGNED BY THE CITY ADMINISTRATOR. I UNDERSTAND THAT, IF I AM HIRED, NO CONDUCT OR STATEMENT, VERBAL OR WRITTEN, WHICH CONTRADICTS THIS DISCLAIMER CAN CONSTITUTE AN EXPRESS OR IMPLIED CONTRACT REGARDING MY EMPLOYMENT, AND I SHOULD NOT RELY ON ANY SUCH CONDUCT OR STATEMENTS.

\_\_\_\_\_  
Signature or Applicant

Date: \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Applicant

CERTIFICATION OF INFORMATION PROVIDED BY APPLICANT

I CERTIFY THAT ALL INFORMATION CONTAINED ON THIS APPLICATION IS TRUE, AND THAT I HAVE PROVIDED COMPLETE RESPONSES TO ALL REQUESTS FOR INFORMATION ON THE APPLICATION. I GIVE THE CITY OF KEMMERER AND ITS AUTHORIZED AGENTS PERMISSION TO VERIFY AND INVESTIGATE ANY EMPLOYMENT LICENSE, CRIMINAL BACKGROUND AND PERSONAL REFERENCE INFORMATION GIVEN BY ME IN CONNECTION WITH THIS APPLICATION.

\_\_\_\_\_  
Signature of Applicant

DATE: \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Applicant

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Other Names You Have Been Known By: \_\_\_\_\_  
\_\_\_\_\_

REQUEST, AUTHORIZATION, AND CONSENT TO RELEASE  
EMPLOYMENT INFORMATION

I request, authorize and consent to the release of information to the City of Kemmerer regarding my previous employment and authorize all past employers or agents that they may designate, to respond to verbal or written inquiries from the City of Kemmerer regarding my employment records, including, but not limited to, positions held, dates of employment, last pay rate, work performance, disciplinary records, reliability and any incidents of dishonesty, insubordination, violence, and/or unsafe, harmful, harassing or threatening behavior, including information based upon materials in my personnel files.

\_\_\_\_\_  
Signature

Date; \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Applicant

Other Names You Have Been Known By: \_\_\_\_\_  
\_\_\_\_\_

FCRA DISCLOSURE AND AUTHORIZATION

DISCLOSURE

From time to time it is necessary for the City of Kemmerer to engage third parties to perform criminal background checks concerning prospective or current employees. A federal law known as the "Fair Credit Reporting Act" (FCRA) applies to these background checks. As an applicant for employment or a current employee of the City of Kemmerer, you are considered to be a "consumer" with rights under FCRA. The City of Kemmerer may choose to obtain and use information about you that is contained in what is known as an "investigate consumer report" from a consumer reporting agency when considering your application for employment when making a decision whether to offer you employment, when deciding whether to continue your employment (if you are hired), or when making other employment-related decisions directly affecting you.

For explanation purposes, a "consumer reporting agency" is a person or business which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly assembles or evaluates information on consumer reports to others, such as the City of Kemmerer.

An "investigative consumer report" means any written, oral or other communication of any information by a consumer reporting agency, in which information on your character, general reputation, personal characteristics, or mode of living is obtained through interviews with your neighbors, friends, or associates reported on or with other with whom you are acquainted or who may have knowledge concerning any such items of information, where such a communication is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for employment purposes.

An investigative consumer report may be requested by the City of Kemmerer. You may request, in writing and within a reasonable time, additional disclosures regarding the nature and scope of the investigation requested as well as a written summary of your rights under the FCRA.

AUTHORIZATION

By signing below, I, \_\_\_\_\_ hereby voluntarily authorize the City of Kemmerer to obtain an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my employment at the City of Kemmerer. I understand that I have rights under the FCRA, including the rights discussed above.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Printed Name