

APPLICATION FOR EMPLOYMENT

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This application must be typewritten or plainly printed in black. All questions must be answered factually and completely. Mark "N/A" to any question that does not apply to you. Do not leave any questions blank. False or evasive answers may result in dismissal, or other disciplinary action at the Employer's option, if employed. Please attach an additional page if necessary for completeness.
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GENERAL INFORMATION

1. Last Name: _____ First: _____ Middle: _____

*Maiden _____ *Alias/Former Names: _____

Social Security No: _____ *Date Of Birth _____

Driver's License No: _____ State: _____

*This information is requested by the employer solely for purposes of ensuring accurate retrieval of records.
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2. Current Address: _____
STREET CITY STATE ZIP

Telephone: _____

How long have you been at the above address? _____

Are you lawfully permitted to work in the United States? ___Yes ___No
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3. Please List All Previous Addresses for the last 7 years. If you do not recall the exact address, list at least the city & state.

Previous Address: _____
STREET CITY STATE ZIP

Previous Address: _____
STREET CITY STATE ZIP

Previous Address: _____
STREET CITY STATE ZIP

Previous Address: _____
STREET CITY STATE ZIP
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RECORD OF EDUCATION

	Name and Location:	Years attended	Did you graduate?	Courses or major
	-----	-----	-----	-----
High School	_____	_____	__Yes __No	_____
College	_____	_____	__Yes __No	_____
Graduate School	_____	_____	__Yes __No	_____
Business/Trade School	_____	_____	__Yes __No	_____
Other	_____	_____	__Yes __No	_____

Do you have any trade licenses or certificates? ___Yes ___No

If yes, give type(s), date, and where issued: _____

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RECORD OF EMPLOYMENT

List below all present and past employment, beginning with your most recent. Start with your present or last job and work back. Include paid or unpaid, full- or part-time, military, summer jobs, etc. If more space is needed, please use the back of this form or attach an additional sheet. Please note that we may contact any previous employer to verify your past duties and reason for separation.

May we contact your present employer? ___Yes ___No

PRESENT/MOST RECENT EMPLOYER Name: _____

Address: _____

Position/Title: _____

Description of Duties and Responsibilities: _____

Starting Date: _____ Ending Date: _____ Hours Per Week: _____

Starting Pay: _____ Ending Pay: _____

Name, Title, and Telephone Number (if known) of your immediate supervisor:

Reason For Leaving: _____

NEXT PREVIOUS EMPLOYER Name: _____

Address: _____

Position/Title: _____

Description of Duties and Responsibilities: _____

Starting Date: _____ Ending Date: _____ Hours Per Week: _____

Starting Pay: _____ Ending Pay: _____

Name, Title, and Telephone Number (if known) of your immediate supervisor:

Reason For Leaving: _____

NEXT PREVIOUS EMPLOYER Name: _____

Address: _____

Position/Title: _____

Description of Duties and Responsibilities: _____

Starting Date: _____ Ending Date: _____ Hours Per Week: _____

Starting Pay: _____ Ending Pay: _____

Name, Title, and Telephone Number (if known) of your immediate supervisor:

Reason For Leaving: _____

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MILITARY HISTORY

Were you in the U.S. Armed Forces? ___Yes ___No

In which branch did you serve? _____

What were your dates of duty? Starting:_____ Ending:_____

Please list your duties, including special training:_____

Type of Discharge: ___ Honorable ___ Less Than Honorable ___ Dishonorable ___ Other

CRIMINAL RECORDS

NOTE: In responding to the questions below, you may consider that non-criminal traffic violations with a maximum fine below \$250 are not convictions. Please note that convictions will not be an arbitrary bar to your employment. Factors such as your age at the time of the offense(s); how long ago such offense(s) occurred; seriousness and nature of the offense(s); extent of relationship between conviction(s) and each particular position for which you apply; and rehabilitation efforts will be taken into account. Falsification of your answers may result in dismissal if you are employed.

Have you ever been CONVICTED of any offense against the law, or ENTERED A PLEA OF NOLO CONTENDRE to an offense against the law regardless of adjudication, or FORFEITED BOND? ___Yes ___No

Are you NOW under any current charge for any offense against the law? ___Yes ___No

Have you ever been convicted by a military court martial? ___Yes ___No

If the answer to any of the three previous questions is Yes, please give the following details: (1) date, (2) time, (3) place, (4) court, and (5) action taken (sentence, time, probation, etc.)

REFERENCES

Please include at least three references that we may contact. Do not list relatives or previous employers or supervisors.

Name: _____ Business: _____

Phone: _____ Address: _____

How Long Known: _____ How Do You Know Them?: _____

Name: _____ Business: _____

Phone: _____ Address: _____

How Long Known: _____ How Do You Know Them?: _____

Name: _____ Business: _____

Phone: _____ Address: _____

How Long Known: _____ How Do You Know Them?: _____

SUPPLEMENTARY INFORMATION

Please enter any additional information. For ease of reference, please indicate a question number if applicable.

PLEASE READ BEFORE SIGNING THE APPLICATION FORM

By signing this application without reservation, I voluntarily authorize and grant full consent to the Employer applied to, and/or their agents, assignees, or any party or agency contacted by the employer, including investigation companies and law enforcement agencies to conduct a thorough investigation into my prior employment and any other area of my background, including criminal background, (regardless of adjudication) which they believe relevant to my employment. , I authorize this employer or any party or agency contacted by this employer to procure my consumer report and/or to obtain or furnish information concerning my credit, criminal, motor vehicle, and other history. I do further consent to the release and disclosure to the company or its agent from any persons, company, corporations, or government agency any information sought concerning my background and do further release from liability the city or its agents for actions taken in connection with this investigation, as well as any persons, companies, corporations, or governmental agencies disclosing such information. I understand that inquiries may be made to various federal and state agencies, employers, references, acquaintances and others seeking information as to my personal characteristics, credit worthiness, employment status, general reputation, and mode of living.

I certify that the facts contained in this application are true and complete to the best of my knowledge. I acknowledge that any false information provided by me to the Employer may constitute grounds for immediate discharge, regardless of when the false information is discovered by the Employer. Similarly, I understand that my continued employment is contingent on successfully passing any background investigation and any information discovered about me during the investigation which was deemed by the Employer to be unsatisfactory may constitute grounds for immediate discharge, also regardless of when discovered.

Date: _____ Signature: _____

Witness Name: _____ Signature: _____

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FCRA NOTICE

This is to inform you that as part of our procedure for processing your employment application, we may obtain a consumer report and/or and investigative consumer report which includes information as to your character, general reputation, personal characteristics and mode of living. If an investigative report is requested, you have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation. I understand I have the right to obtain a free copy of this consumer report if: (1) Any adverse action/decision is made based on the information in the consumer report, & (2) If the request is made in writing within 60 days of the adverse action.

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Note to Employer from investigative and reference agencies:

Disclaimer:

While the information contained in the reports provided on the above applicant has been obtained from public records data sources deemed reliable, its accuracy cannot be guaranteed due to potential human error in the actual recording of the record. Since this information is not owned by the investigative agency, and since public records data on any one individual, group of individuals, company, or companies can be contained in more than one repository, the investigative agency can only rely on its accuracy from the public records data sources presently available at the time of the search. This information is furnished for your exclusive use and accepted by you without any liability on the part of the investigative agency, its sources, officers, agents or employees. Furthermore you agree to indemnify the investigative agency, its sources, agents, and employees of any liability for the use of this information and shall agree that the right to obtain and the purpose for this information, for your exclusive use, is fully within the appropriate law or laws which apply to the permissible purpose of retrieving background information on an individuals criminal records history, credit history and / or workers compensation claim history.