

NAME (PLEASE PRINT) _____ DATE _____
Last First Middle
PRESENT ADDRESS _____ PHONE # _____
Street No. City State Zip Code
POSITION APPLIED FOR _____

Application For Employment

An equal Opportunity Employer

City of Ash Flat
P.O. Box 280
Ash Flat, AR 72513-0280

We are pleased that you are interested in employment with us. We offer equal opportunities to all persons without regard to race, color, religion, age, sex, national origin, handicap or veteran status. Please complete this application form in ink in your own handwriting. Answer all questions fully since all statements made by you will be checked for accuracy. We will give this application every consideration, however, accepting it does not imply a commitment of employment.

THIS APPLICATION FOR EMPLOYMENT WILL BE REMOVED FROM OUR ACTIVE FILES AFTER 90 DAYS. UNLESS RENEWED BY THE APPLICANT.

PLEASE PRINT IN INK

Date of Application	Date Available for Employment	Type of Employment		
		Full time	Part time	Temporary

Name: _____ SS # _____ / ____ / ____
Last First Middle

PRESENT ADDRESS _____ PHONE # _____
Street No. City State Zip Code

Previous Address (If at present Address less than one year)
_____ Street No. City State Zip Code

Position(s) Applied For: _____
Location Preference (if any) _____

If Applying for part time position: Days _____ Hours from _____
A.M. P.M. To _____ A.M. P.M. Shift Preference: 1st _____ 2nd _____ 3rd _____

Are you over the age of 18? Yes ___ No ___ If no, employment subject to verification of minimum legal age by age certificate of work permit.

Do you have the legal right to live and work in the U.S.? Yes ___ No ___ If not a U.S. Citizen, please provide proof that you can legally be employed in the United States (Form Nos. 1-151 or 1-94)

Have you ever applied for employment with us before? Yes ___ No ___ If yes, when _____ (Date)

Have you ever been employed by us? Yes ___ No ___ If yes, from _____ (mo./yr.) to _____ (mo./yr.)

How were you referred to us? Employee referral ___ Newspaper ad ___ College recruitment ___ Walk in ___
Other _____

Are you presently employed? Yes ___ No ___

If now employed, does your employer know of your plans to change employment? Yes ___ No ___

May we contact your present employer? Yes ___ No ___

Why do you desire to make a change in employment at this time? _____

Have you ever been discharged or asked to resign from a position? Yes ___ No ___

If so, explain _____

Have you ever held a position of trust (handling monies, securities or confidential material)? Yes ___ No ___

Have you ever been bonded? Yes ___ No ___

Have you ever been convicted of any crime, other than minor traffic violations, since the age of 18 or within the last five years?

Yes ___ No ___ If yes, state details (date, offense, place of occurrence) _____

Do you have any physical defects, or impediments which, in any way, might hinder your ability to perform the job for which you have applied? Yes ___ No ___ If yes, please explain _____

Do you have steady transportation to work? Yes ___ No ___

If applying for a position requiring the driving of a motor vehicle, do you have a valid license for the type vehicle to be operated? Yes ___ No ___ If so, expiration date _____ license # _____ state of issue _____

	TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	MAJOR COURSE OF STUDY	CIRCLE		DEGREE
				LAST YEAR COMPLETED	GRADUATE	
EDUCATION	ELEMENTARY			5 6 7 8	Yes No	
	HIGH SCHOOL			1 2 3 4	Yes No	
	VOCATIONAL OR BUSINESS SCHOOL			1 2 3 4	Yes No	
	COLLEGE			1 2 3 4	Yes No	
	GRADUATE SCHOOL			1 2 3 4	Yes No	
	OTHER (Specify)			1 2 3 4	Yes No	

Describe any other specialized professional training (such as technical, correspondence, or night school courses): _____

Specify professional designations, certifications, licenses, or registrations held _____

Issued in what State _____ Expiration Date _____

Complete if applying for a clerical position: List machines you can operate:

() Typewriter _____ WPM () Calculator () Multilith
 () Stenotype _____ WPM () Switchboard () Bookkeeping Machine
 () Addressograph () Mimeograph () Key Punch
 () Ditto () Teletype () Other
 () Dictaphone () Computer Terminal
 Shorthand Speed _____ WPM

Data Processing or Accounting Positions:

Please indicate speciality _____

Other skills which would be of assistance in determining qualifications for employment _____

Have you served in the armed forces? () yes () no If yes, From _____ To _____

Which Service? _____ What branch of that service? _____

Starting rank _____ Final rank _____ What were your duties? _____

List schooling and special training received in service with approximate time _____

List personal references (Do not include relatives or former employers)

Name _____ Address _____ Occupation _____

Name _____ Address _____ Occupation _____

Name _____ Address _____ Occupation _____

Start with most recent or present employer.

WORK HISTORY

1. Name of employer	Address	Telephone No.
Immediate Supervisor (Name and Position)	Date Hired	Starting Rate
Present or Final Position	Date Left	Final Rate
Job Duties _____		
Reason for leaving _____		

2. Name of employer	Address	Telephone No.
Immediate Supervisor (Name and Position)	Date Hired	Starting Rate
Present or Final Position	Date Left	Final Rate
Job Duties _____		
Reason for leaving _____		

3. Name of employer	Address	Telephone No.
Immediate Supervisor (Name and Position)	Date Hired	Starting Rate
Present or Final Position	Date Left	Final Rate
Job Duties _____		
Reason for leaving _____		

JOB APPLICANTS AGREEMENT AND CERTIFICATION

"I certify that the information given by me in this application is true in all respects, and I agree that if employed and it is found to be false in any way, that I may be subject to dismissal without notice, if and when discovered. I authorize the use of any information in this application to verify my statements, and I authorized the past employers, doctors, all references and other persons to answer all questions asked concerning my ability, character, reputation, and previous employment records. I release all such persons from any liability or damages on account of having furnished such information. I further agree, if employed, that I am to work faithfully and diligently, to be careful and avoid accidents to come to work promptly, and I am not to be absent for any reason without prior notice to my supervisor."

"I agree to be employed on a _____ calendar day's probationary period and that I may be dismissed at any time during this period at the discretion of the employer. I agree to submit to a physical examination whenever requested and, if employed, I agree to abide by all present and subsequently issued personnel policies and rules."

DATE

SIGNATURE OF APPLICANT

DO NOT WRITE BELOW THIS LINE

RECORDS OF INTERVIEWS

INTERVIEWED BY	DEPARTMENT	DATE	COMMENTS AND RECOMMENDATIONS
1			
2			
3			

If accepted for employment

Starting Date _____ Starting Rate _____ Employee Number _____
 Position _____ Department _____ Location _____
 Date _____ Employed By _____
 Date _____ Approved By _____