

CITY OF DUNES CITY APPLICATION FOR EMPLOYMENT

Please Print

Position applying for _____

Social Security Number _____ Home Phone: _____

Name _____ Message Phone: _____
Last First MI

Home Address _____
Street City State Zip

May we contact you at work?__ What is the best time to call?__ at work?__ at home?__

Drivers License Number _____ Are you bondable? _____

List any other last name in which your educational or employment records are filed:

Are you available to work: Nights? ____Yes ____No Weekends? ____Yes ____No

Are there any times during the day or evening you are not available to work? If yes, specify

EDUCATION

Circle last grade completed. 1 2 3 4 5 6 7 8 9 10 11 12

College 13 14 15 16 17 18 19 20 Other: # of years _____

Starting with High School, list schools attended and their location Type Degree Earned Course of Study

Starting with High School, list schools attended and their location	Type Degree Earned	Course of Study

List any school course or vocational training, licenses certifications, or other qualifications which bear on your suitability for this position:

Typing speed ____ wpm Do you operate a computer ____ yes ____ no

What computer programs can you operate?

EMPLOYMENT_ HISTORY

Please complete this section and/or attach a resume. List your work experience, most recent employer first.

Employer

Immediate Supervisor & Title

Address

Phone

Job Title _____ From: Mo. ____ Yr. ____ To: Mo. ____ Yr. ____ Salary _____

Description of job duties:

Reason for Leaving:

Employer

Immediate Supervisor & Title

Address

Phone

Job Title _____ From: Mo. ___Yr. ___To: Mo. ___Yr. ___Salary_____

Description of job duties:

Reason for Leaving:

APPLICANT STATEMENT MUST BE SIGNED

The information in my application was freely given and is, to the best of my knowledge, true and complete. I understand that any false or misleading answer or statement will be sufficient grounds for immediate dismissal at any time. The City of Dunes City is hereby authorized to contact present and past employers as references and to receive from them any information contained in their personnel records and any evaluation of my job knowledge, skills and performance. I hereby release the City as well as those contacted by the City from any liability or damage which may result from furnishing the information requested. The City may make copies of this authorization available to those contacted. IN ACCORDANCE WITH THE 1986 IMMIGRATION REFORM ACT, PROOF OF ELIGIBILITY TO WORK IN THE UNITED STATES IS REQUIRED UPON EMPLOYMENT. APPLICANT'S SIGNATURE IS REQUIRED TO PROCESS APPLICATION

SIGNATURE: _____ DATE: _____

It is the policy of the City of Dunes City to provide equal opportunity in all terms, conditions and privileges of employment without regard to race, color, national origin, sex, age, marital status, veteran status or disability.