Employment Application

City of West Branch

Last Name		First Name		Middle Name	
Address	Street	City	State	ZIP Code	
	_	Social Securi			
	-	per where we can leave a me	_		
		elationship:	Number: _		
-	rn about the employr	• • • • • • • • • • • • • • • • • • • •			
☐ Newspaper ☐ Walk-in		☐ Employment Agency ☐ Education Institution			
Please be su		tems completely and a	ccurately.		
Have you ever fi Have you ever b If yes, in what ca Reason for leavi What is the mini	led an application with useen employed with usepacity?ng?mum salary that you y relatives, including	r work? Yes □ Ne us before? □ Yes □ Ne us before? □ Yes □ Ne us before? □ From: From: in-laws, currently employed key and department in which they	o If yes, Mor	nth/Year: ∕es □ No	

Education

	High School	Undergraduate College/University	Graduate/Professional
School Name and Location			
Diploma/Degree			
Course of Study			
Describe any skill	s, specialized training, a	oprenticeship, and applicable e	extra-curricular activities.
List equipment a	nd computer software y	ou can operate.	
eferences			
Give name, addreare not previous		ber of three references who a	are not related to you and
Name	Add	dress	Phone
Name 3.	Ado	dress	Phone
Name	Ado	dress	Phone

Employment ExperienceList previous 10 years of employment. Start with your present or last job. Add another sheet if necessary.

1.	Employer	Dates Employed From / To	Work performed			
_	Address					
_	Telephone number	Hourly Rate/Salary Starting / Final				
_	Job title	Ü				
	Supervisor		Reason for leaving			
_	May we contact the employer listed above	?	no, why?			
2.	Employer	Dates Employed From / To	Work performed			
_	Address					
	Telephone number	Hourly Rate/Salary Starting / Final				
	Job title	J				
_	Supervisor		Reason for leaving			
_	May we contact the employer listed above? ☐ Yes ☐ No If no, why?					
3.	Employer	Dates Employed From / To	Work performed			
	Address					
	Telephone number	Hourly Rate/Salary Starting / Final				
_	Job title	G				
_	Supervisor		Reason for leaving			
_	May we contact the employer listed above? ☐ Yes ☐ No If no, why?					
4.	Employer	Dates Employed From / To	Work performed			
	Address					
_	Telephone number	Hourly Rate/Salary Starting / Final				
_	Job title	3 3				
_	Supervisor		Reason for leaving			
_	May we contact the employer listed above? ☐ Yes ☐ No If no, why?					

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time

I hereby acknowledge that any employment relationships with The City of West Branch is of an At-Will nature, which means that the employee may resign at any time and that The City of West Branch may discharge at any time with or without cause. I understand that neither this document nor any offer of employment from The City of West Branch constitutes an employment contract unless a specific document to that effect is executed by The City of West Branch and me it writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) shall be considered sufficient cause for dismissal. I further understand that an incomplete application or an absence of my signature on this application is just cause for rejection of this application. I agree to employment entrance exams, if necessary, at The City of West Branch cost. I understand that I am required to abide by all rules and regulations of the employer.

Signature of Applicant Date

It is the policy of The City of West Branch to provide equal treatment to all employees and applicants for employment without regard to race, color, religion, political affiliation, creed, sex, sexual orientation, national origin or ancestry, age, mental or physical disability, marital status, except as bona fide occupational qualifications may require otherwise. This policy applies to all Human Resources actions and procedures including, but not limited to: recruitment, selection, training, compensation, benefit programs, promotion, demotion, transfer and termination of employment.