

City of North Branch 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, sexual orientation, or any other legally protected status.

(PLEASE PRINT OR TYPE)

Position(s) Applied For		Date of Application		
How Did You Learn About Us?				
Advertisement	Friend	Walk-In		
Employment Agency	Relative	Other _____		
Last Name		First Name		Middle Name
Address	Street Address	City	State	Zip Code
Telephone Number(s)		Social Security Number		

If you are 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 _____
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?	Yes	No
<i>Proof of citizenship or immigration status will be required upon employment.</i>		
On what date would you be available for work?		_____
Are you available to work:	Full Time	Part Time
	Shift Work	Temporary
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 7 years?	Yes	No
<i>Conviction will not necessarily disqualify an applicant from employment.</i>		
If Yes, please explain _____		

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read, and/or write.			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.

Describe any job-related training received in the United States military.

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.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
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 separate sheet of paper.

List professional, trade, business, or civic activities and offices held.	
<i>You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.</i>	
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Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills Check Skills/Equipment Operated

Personal Computer	WordPerfect	Other (Please List): <hr/> <hr/>
Calculator	Quattro Pro	
Typewriter	CAD	
Fax	Internet	

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

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 description of the activities involved in such job or occupation is attached.

Yes No

References

1. _____ (Name) _____ (Phone)

_____ (Address)
2. _____ (Name) _____ (Phone)

_____ (Address)
3. _____ (Name) _____ (Phone)

_____ (Address)

Applicant's Statement

I certify that the 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 decisions.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arranged Interview: Yes No Interviewer: _____ Date: _____

Remarks _____

Employed: Yes No Date of Employment: _____

Job Title: _____ Department: _____

Salary Range and Step: _____ HourlyRate/Salary _____

Authorized by: _____

(Name and Title)

(Date)

NOTES: _____

FOR PERSONNEL DEPARTMENT USE ONLY

Position(s) Applied For Is Open: Yes No

Position(s) Considered For: _____

Date Application Received: _____

NOTES: _____
