City of Estherville Application for Employment

TO APPLICANT: We deeply appreciate your interest in our organization. Thank you for taking the time to complete this application. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to information obtained from a consumer reporting agency, including but not limited to information regarding credit data, personal character, general reputation and mode of living. This list, however, is not exhaustive of the grounds on which discrimination is prohibited.

PERSONAL	(PLEASE PRINT CLEAR	LY)	
Date			
Name			
	Last	First	Middle
Social Security No.		Telephone No	
Address	. Street	City	state Zip
INU	. Street	City	clate Zip
Are you legally eligi of your eligibility to	ble for employment in the work in the U.S.A.	he U.S.A.? Yes No If hired, y	ou are required to submit proof
Are you over the ag legal age.	e of eighteen? Yes	No If no, hire is subject to verific	cation that you are of minimum
Position(s) applied	For	· · · · · · · · · · · · · · · · · · ·	
Were you previously	y employed by us? Yes_	No If yes, when?	
If your application is	considered favorably,	on what date will you be available for wo	ork?
	job related experiences	s, skills, or qualifications which will be of	special benefit in the job for
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EMPLOYMENT HISTORY

List below present and past employment, beginning with your most recent **EMPLOYER #1** Weekly Weekly From To Name of Reason for Starting Last Name and Address of Company Supervisor Leaving Salary Salary and Type of Business Mo. Yr. Mo. Yr. Describe the work you did: Telephone **EMPLOYER #2** Weekly Weekly From То Reason for Name of Starting Last Name and Address of Company Leaving Supervisor Salary Salary and Type of Business Mo. Yr. Mo. Yr. Describe the work you did: Telephone **EMPLOYER #3** Weekly Weekly То From Reason for Name of Starting Last Name and Address of Company Supervisor Leaving Salary Salary and Type of Business Mo. Yr. Mo. Yr. Describe the work you did: Telephone **EMPLOYER #4** Weekly Weekly To From Reason for Name of Starting Last Name and Address of Company Leaving Supervisor Salary Salary and Type of Business Mo. Yr. Mo. Yr. Describe the work you did: Telephone I hereby give permission to contact the employers listed above concerning my prior work experience as indicated Employer #2? Yes ____ No ____ Employer #1? Yes ____ No ___ Employer #4? Yes ____ No ____ Employer #3? Yes ____ No ____ Signed _____

RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed			Did You Graduate?	List Diploma or Degree		
Elementary		N/A	5	6	7	8	☐ Yes	N/A	
High School			1	2	3	4	☐ Yes		
College			1	2	3	4	☐ Yes		
Other (Specify)			1	2	3	4	☐ Yes	,	
	PERSONAL REFERENCES	(Not Former Employers	s or	Re	lativ	ves)			
Nan	ne and Occupation	Address					Phone I	Number	
	ne you to follow up on this application at h								
•	May we telephone you to follow up on this application at work? Yes No								
	e best time to call?								
vvnat is your bus	siness telephone number?								

PLEASE READ AND SIGN BELOW

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a writing signed by an officer.

Signature	of Ap	plicant	

APPLICANT - Do not write on this page

FOR INTERVIEWER'S USE

	INTERVIEWER	₹ , ,	DATE			COMMENTS	
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FOR TEST ADMINISTRATOR'S USE

TESTS ADMINISTERED	DATE	SCORE	COMMENTS
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REFERENCE CHECK

Position Number	RESULTS OF REFERENCE CHECK
1	
2	
3	
4	