



City of Clinton Application for Employment

We consider applicants for all positions without regard to race, color, creed, religion, gender, national origin, age, disability, marital status, or any other legally protected status (EoE).

GENERAL

Name _____

Home Address _____

Daytime Phone _____

Email _____

Are you a citizen of the United States? Yes ☐ No ☐

If no, do you have a valid work permit? Yes ☐ No ☐

Are you 18 years old or older? Yes ☐ No ☐

Have you ever been employed or applied for employment with the City?

Yes ☐

No ☐

If yes, when? _____

Position _____

Do you have relatives employed by the City? Yes ☐ No ☐

If yes, Name _____ Relationship _____ Position _____

In case of emergency, please contact _____

Have you ever been convicted of a felony? Yes ☐ No ☐

If yes, explain nature of crime and date of conviction _____

Are you a veteran of the United States Military Service? Yes ☐ No ☐

Date of active duty _____

WORK PREFERENCE

Position applying for: _____ Date available for work: _____

Are you available and willing to work overtime? Yes ☐ No ☐

Are you available and willing to work shift work? Yes ☐ No ☐

Employment – Resumes will not be accepted in lieu of completion of this part or any part of this application.

If you are currently employed, may we contact your present supervisor? Yes ☐ No ☐

Please start with the most recent employer.

1. Name of current/last employer _____
Address _____
Supervisor's Name _____ Phone _____
Starting Date _____ Ending Date _____
Starting Salary _____ per _____ Ending Salary _____ per _____
Hours per week _____
Job Title _____
Duties _____

Reason for Leaving _____

2. Name of previous employer _____
Address _____
Supervisor's Name _____ Phone _____
Starting Date _____ Ending Date _____
Starting Salary _____ per _____ Ending Salary _____ per _____
Hours per week _____
Job Title _____
Duties _____

Reason for Leaving _____

3. Name of previous employer _____
Address _____
Supervisor's Name _____ Phone _____
Starting Date _____ Ending Date _____
Starting Salary _____ per _____ Ending Salary _____ per _____
Hours per week _____
Job Title _____
Duties _____

Reason for Leaving _____

4. Name of previous employer _____
Address _____
Supervisor's Name _____ Phone _____
Starting Date _____ Ending Date _____
Starting Salary _____ per _____ Ending Salary _____ per _____
Hours per week _____
Job Title _____
Duties _____

Reason for Leaving _____

List any special skills in the operation of machinery or equipment_____

EDUCATION – Are you a high school graduate or equivalent? Yes ☐ No ☐

School Name & Address	Course of Study or Major	Type of Degree/Certificate Received
_____	_____	_____
_____	_____	_____
_____	_____	_____

If applicable, Typing Speed_____ Shorthand Speed_____

Do you possess any of the following licenses? Yes ☐ No ☐ If yes please check valid license.

Drivers License_____ Chauffeur License_____ Commercial License_____

List any special training (Short courses, workshops, etc.)_____

REFERENCES –

List the name, address, and phone number of three people with knowledge of your character, work experience, and skills or ability for the job you are applying for. Do not list relatives.

NAME	ADDRESS	TELEPHONE	PLACE OF EMPLOYMENT	LENGTH OF AQUAINTANCE

All statements made on this application are true and correct. I understand that intentional false statements made on this application will eliminate me from further consideration for employment or will be grounds for dismissal. I authorize the City of Clinton, and all my previous employers, educational institutions, law enforcement agencies, and other organizations named in this application (with the exception of _____) to conduct or participate in an investigation of my personal background, work history, educational credentials and police record as may be necessary to verify the information provided in my employment application and to determine my fitness to hold the position for which I have applied.

Applicant Signature_____

Date_____