

City of Bloomfield

Application for Employment

PLEASE TYPE OR PRINT- ANSWER ALL APPLICABLE QUESTIONS

POSITION APPLIED FOR _____ DATE OF APPLICATION ____/____/____

NAME _____ SS# _____
LAST FIRST MI

OTHER NAMES USED _____

MAILING ADDRESS _____

HOME TELEPHONE NUMBER (____) _____ - _____ EMAIL _____

If necessary, best time to call you at home is.....
BEST TIME TO CALL

May we contact you at work?..... YES NO

If yes, WORK TELEPHONE NUMBER and Best Time To Call ... (____) _____ - _____
BEST TIME TO CALL

If you are under 18, can you furnish a work permit?..... YES NO

Have you ever been employed by the City of Bloomfield?..... YES NO

If yes, give dates..... FROM ____/____/____ TO ____/____/____

Are you legally eligible for employment in this country?..... YES NO
(Proof of U.S. citizenship or immigration will be required upon employment)

Date available for work..... ____/____/____

Desired Wage \$ _____

Will work overtime if required?..... YES NO

Have you been convicted of any law violation other than a minor traffic violation? .. YES NO

If yes, give details: _____

(i.e.: "YES" answer does not automatically disqualify you from employment since the nature of the offense, date and the job for which you are applying will also be considered.)

P.O. Box 157 Bloomfield, NE 68718-0157 (402) 373-4396

AN EQUAL OPPORTUNITY EMPLOYER

1. For driving jobs ONLY: Do you have a valid license?..... YES NO

a. Have you ever had your Driver's license suspended or revoked?..... YES NO

Driver's License # _____ State _____

2. Have you ever been dismissed from any position?..... YES NO

If yes, please explain: _____

3. Have you ever been forced to resign from any position?..... YES NO

If yes, please explain: _____

4. Are you related to anyone presently working for the City of Bloomfield?..... YES NO

If yes, list their name and the department in which they work: _____

SPECIAL SKILLS AND QUALIFICATIONS: Summarize special skills and qualifications acquired from employment or other experiences that relate to this position.

List special accomplishments, publications, awards, and the names of professional groups of which you are or have been a member.

List any additional information you would like us to consider. _____

EMPLOYMENT HISTORY

List your employment history starting with the most recent employer. List all positions held, including military experience, part-time, summer and/or volunteer work and periods of unemployment. Explain any gaps in employment in comments section below.

Employer	Telephone ()	Dates Employed From To		Summarize your job responsibilities
Address				
Job Title		Starting Salary		
Immediate Supervisor and Title		\$	Hourly Monthly	
Reason for Leaving		Final Salary		
May we contact this employer? Yes/No		\$	Hourly Monthly	

Employer	Telephone ()	Dates Employed From To		Summarize your job responsibilities
Address				
Job Title		Starting Salary		
Immediate Supervisor and Title		\$	Hourly Monthly	
Reason for Leaving		Final Salary		
May we contact this employer? Yes/No		\$	Hourly Monthly	

Employer	Telephone ()	Dates Employed From To		Summarize your job responsibilities
Address				
Job Title		Starting Salary		
Immediate Supervisor and Title		\$	Hourly Monthly	
Reason for Leaving		Final Salary		
May we contact this employer? Yes/No		\$	Hourly Monthly	

Employer	Telephone ()	Dates Employed From To		Summarize your job responsibilities
Address				
Job Title		Starting Salary		
Immediate Supervisor and Title		\$	Hourly Monthly	
Reason for Leaving		Final Salary		
May we contact this employer? Yes/No		\$	Hourly Monthly	

Comments (including explanations of any gaps in employment)

EDUCATIONAL BACKGROUND

Circle Highest Grade Completed: HIGH SCHOOL COLLEGE GRADUATE WORK
 8 9 10 11 12 GED 1 2 3 4 YES NO

HIGH SCHOOL /COLLEGE/TRADE SCHOOLS	CITY/STATE	UNITS COMPLETED	DEGREE DIPLOMA	YEAR	MAJOR

Have you ever worked or attended school under any other name?..... YES NO

If yes, give names: _____

PROFESSIONAL REFERENCES

List names and telephone numbers of three professional references who are not related to you and are not previous supervisors.

NAME AND ADDRESS	TELEPHONE	YEARS KNOWN

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING.

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration and may result in my dismissal if discovered at a later date.

I understand that the employer may request an investigation consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from interviews with neighbors, friends, former employers, schools, and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that if I am extended an offer of employment it may be conditioned upon my successful passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre and /or post employment drug screen as a condition of employment, if required.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____