

Employment Application



An Equal Opportunity Employer

Date

Print name		Last		First		Middle	
Other names by which you may be known:				Day Telephone Number			
Mailing Address		City	State	Zip Code	Evening Telephone Number		
Street Address		City	State	Zip Code	Are you legally eligible for employment in the United States?		
Are you 18 years of age or older? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Position or type of work desired			Wage/Salary expected		Are you available for: <i>check all that apply</i>		
					<input checked="" type="checkbox"/> Full-time work <input checked="" type="checkbox"/> Part-time work <input checked="" type="checkbox"/> Seasonal work		
Will you work overtime and outside your regular work schedule if asked? Yes No <i>Circle one</i>							
How did you learn of our job opening?			Have you ever been employed by Price City? If so when and what department?				
List the names of any relatives, including those by marriage or adoption, currently employed by Price City.							

Account for all periods of employment and unemployment, including military. **Beginning with your present employer**, list all employers for whom you have worked, either full-time or part-time, since you completed your full-time education or the last 15 years. Describe, giving dates and reasons, each period of unemployment on a separate sheet and attach to this application. Indicate employers whom you **DO NOT** want contacted for a reference.

Employed	Company Name and address	Supervisor	Pay rate
From			
To	Type of business	Telephone	<input checked="" type="checkbox"/> Full-Time <input checked="" type="checkbox"/> Part-Time <input checked="" type="checkbox"/> Temporary
Ok to contact?			
Job title and duties:		Reason for leaving:	

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Ok to contact?			
Job title and duties:		Reason for leaving:	

EDUCATION AND SKILLS	School	Name and Location	Graduated (Yes or No)	Major Course of Study	Date Completed
	High School				
	College/University				
	Business/Trade				
	Other				
	List other types of skills, and proficiencies where applicable.				
Clerical (i.e. typing, word processing, computer software skills, etc.)					
Equipment (i.e. backhoe, loader, forklift, etc.)					
Verbal Languages (Indicate ability to read, write or speak)					
Other					

REFERENCES	List three persons who can objectively assess your professional and/or scholastic performance.			
	Name	Relationship / Title	Address	Telephone

OTHER	For Positions That May Involve or Require Driving or Operating Price Municipal Corporation Vehicles	
	Driver's License	License issued by State of
	What type of Driver's License do you have (check one): <input checked="" type="checkbox"/> CDL (Commercial) <input type="checkbox"/> Operators	Have you been convicted of a DUI or DWI within the past 3 years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Is your license presently restricted, suspended or revoked: If yes, the date it began _____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No and the date ended (or will end) _____

IMPORTANT: READ CAREFULLY. AS AN APPLICANT, YOU AGREE TO AND UNDERSTAND THE FOLLOWING:

CERTIFICATION: I certify that the information on this application is true, correct and complete; and I understand that any misleading information, omission or falsification of this information is grounds for rejection of this application or my dismissal from employment. I understand that any employment I am offered at Price City is "at will" and that I may leave or be terminated at any time for any reason.

AUTHORIZATION: I authorize Price City to verify the information set forth in this application and to obtain additional information relating to my employment background, character, and qualifications such as driving records, background checks, credit checks, drug screens and physicals. I authorize all persons, schools, companies, corporations, credit bureaus, law enforcement agencies, and my present and/or prior employers to supply Price City any information concerning my employment background, character, and qualifications, and release all parties from all liability for any damage resulting from furnishing same to Price City. If a record or report is disputed by you, the applicant, and an employment decision is based on that information you may have a reasonable opportunity to investigate and correct the record.

COMPLIANCE: I agree to comply with all company policies, rules, and regulations now or hereafter effective.

CONSENT: I hereby consent to a pre-employment, post-offer medical examination and inquires, and alcohol, drug, and substance screening, and I understand that any offer of employment will be contingent upon satisfactory results of such examination inquiries and screening. I also consent to personal information associated with my employment being stored, or processed as required for the purposes of my employment by Price City on condition that Price City will, so far as possible, keep such information confidential. If a record or report is disputed by you, the applicant, and an employment decision is based on that information you may have a reasonable opportunity to investigate and correct the record.

VERIFICATION: If employed, I promise, as a condition of employment, that I will within three days of starting work submit to the Human Resources Department verification of my U.S. employment eligibility as required by law.

I hereby acknowledge that I have carefully read, understand, and agree to the above.

Date _____ Name _____ Signature _____



PRICE CITY POLICE DEPARTMENT

910 NORTH 700 EAST

PRICE, UTAH 84501

(435) 636-3190

CONSENT TO A BACKGROUND/CRIMINAL HISTORY CHECK

I hereby consent to a background security and criminal history check to be performed by the Price City Police Department in connection with my employment application.

Dated this _____ day of _____, 202_____

Signature

(Please Print Name)

**PRICE MUNICIPAL CORPORATION
EEO/AFFIRMATIVE ACTION INFORMATION**

The information below is needed to measure the effectiveness of our recruitment efforts and is to help us conform with federal government guidelines which require us to compile statistical information about applicants for employment. You are not required to furnish this information, but are encouraged to do so. This information will not influence selection and will not be used as a basis for election; it is merely for statistical purposes.

This information sheet will be immediately detached from the application and kept in a confidential file separate from the Employment Application.

Name: _____ Date: _____

Position for which you are applying for: _____

Please mark appropriately: Male Female

INVITATION TO SELF – IDENTIFY

Are you Hispanic or Latino? a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. Yes No

If you answered “YES” you have completed this form. If you answered “NO” please select a race from the options below.

- White:** a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American:** a person having origins in any of the black racial groups of Africa.
- Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or Other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- American Indian or Alaska Native:** a person having origins in any of the original peoples of North and South American (including Central America), and who maintains tribal affiliation or community attachment.
- Two or More Races (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.