

Employment Application



An Equal Opportunity Employer

Date

PERSONAL INFORMATION	Print name		Last		First		Middle		
	Other names by which you may be known:			Social Security Number		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 type="checkbox"/> Yes <input type="checkbox"/> No If no, list date of birth:								
	Have you ever been convicted of a felony?						Yes	No	Circle one
	Have you ever been convicted in a court for anything other than a traffic misdemeanor?						Yes	No	Circle one
	If yes to either question, please describe. (You will not necessarily be disqualified for the job applied for).								
	Position or type of work desired			Wage/Salary expected		Are you available for: <i>check all that apply</i>			
						<input type="checkbox"/> Full-time work <input type="checkbox"/> Part-time work <input 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.

EMPLOYMENT HISTORY	Employed	Company Name and address	Supervisor	Pay rate	
	From				
	To	Type of business	Telephone	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
	Ok to contact?			<input type="checkbox"/> Temporary	
	Job title and duties:		Reason for leaving:		
	Employed	Company Name and address	Supervisor	Pay rate	
	From				
	To	Type of business	Telephone	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
	Ok to contact?			<input type="checkbox"/> Temporary	
	Job title and duties:		Reason for leaving:		
	Employed	Company Name and address	Supervisor	Pay rate	
	From				
	To	Type of business	Telephone	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
	Ok to contact?			<input type="checkbox"/> Temporary	
	Job title and duties:		Reason for leaving:		
	Employed	Company Name and address	Supervisor	Pay rate	
	From				
	To	Type of business	Telephone	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
	Ok to contact?			<input type="checkbox"/> Temporary	
	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	Driver's License #	License issued by State of
	What type of Driver's License do you have (check one): <input type="checkbox"/> Operators <input type="checkbox"/> CDL	Have you been convicted of a DUI or DWI within the past 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is your license presently restricted, suspended or revoked: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give reason: the date it began _____ 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.

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. 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.

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.

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 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.