

EDUCATION

High School and Highest school year completed _____

High School

Grade Completed

Have you received a high school diploma or equivalent?

() Yes () No

Education Beyond High School	Name and Location	Did you Graduate?	Credit Hours	Degree, Diploma or Certificate Earned or Number of Years Completed	Major or Minor
College or University		Yes No			
College or University		Yes No			
Graduate or Professional School		Yes No			
Graduate or Professional School		Yes No			
Technical Institutes, Internship, Other		Yes No			
Technical Institutes, Internship, Other		Yes No			

SKILLS, KNOWLEDGE & ABILITIES

Please list any skills, knowledge, or abilities you have that you feel are applicable to the position(s) for which you are applying. Include skills with equipment or machines you operate including computer equipment and software packages you are familiar with.

REGISTRATIONS, LICENSES, CERTIFICATIONS

List fields of work for which you have been registered, licenses or certified.

Registration: _____ State: _____ Expiration Date _____

Registration: _____ State: _____ Expiration Date _____

Other: _____

Please list your valid driver's license number and the state in which it was issued. If you do not have a driver's license, please put None in the blank. Number _____ State _____

Is your driver's license a Commercial Driver's License? () Yes () No If yes, indicate the class _____

EMPLOYMENT

Record your complete work history in the spaces below. Begin with your current or most recent position. Include military and related volunteer experience. Attach sheets as necessary to account for your complete record. Be sure to account for gaps in your employment history.

Job Title _____	Starting Salary _____	Ending Salary _____
Name and Title of Supervisor _____		
Employer or company _____		
Full time or part-time _____	Number of employees supervised _____	
Date Employed _____	Date Separated _____	
Duties _____		
Reason for leaving _____		
Job Title _____	Starting Salary _____	Ending Salary _____
Name and Title of Supervisor _____		
Employer or company and address _____		
Full time or part-time _____	Number of employees supervised _____	
Date Employed _____	Date Separated _____	
Duties _____		
Reason for leaving _____		
Job Title _____	Starting Salary _____	Ending Salary _____
Name and Title of Supervisor _____		
Employer or company _____		
Full time or part-time _____	Number of employees supervised _____	
Date Employed _____	Date Separated _____	
Duties _____		
Reason for leaving _____		

OTHER INFORMATION

Have you had disciplinary action taken against you in the past 12 months of employment?

Yes No

If yes, please explain _____

Have you ever been dismissed or forced to resign from any job?

Yes No

If yes, please explain _____

May we contact your present employer or any employer identified in the EMPLOYMENT section for reference?

Yes No

If yes, please list the employers we may contact. If no, please explain.

PERSONAL REFERENCES

Name	Phone Number	Address	Relationship

I authorize the City of King to conduct a personal background investigation in connection with my application. This investigation may include information from educational institutions, police and/or court records, Department of Motor Vehicle records, listed personal references, previous employers and other appropriate sources.

I authorize the release of any information the City of King may request from the above sources. I further waive all rights to inspection or review of any information compiled.

I fully understand all information gained from such investigation is confidential.

I agree to provide any further information which may be requested and hereby certify that there are no willful or negligent misrepresentations, omissions, or falsifications in any of the applications or documents furnished or answers to questions. I am aware should any investigation disclose any willful misrepresentations, omissions, or falsifications that my application may be rejected. Additionally, I am aware that willful misrepresentations, omissions, or falsifications in any of the applications or documents furnished or answers to questions are grounds for termination should I be employed by the City of King.

I hereby release the City of King, its agents and representatives and any person(s) so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such document, records, and other information for the investigation made by the City of King.

Furthermore, I understand that employment with the City of King is contingent upon the successful completion of a drug screening test to be administered after an offer of employment is made. (Successful completion of the test means that the person tested negative for illegal drugs and substance abuse.)

SIGNATURE _____

DATE _____

**SUPPLEMENT TO CITY OF KING
EMPLOYMENT APPLICATION**

The City of King is an Equal Opportunity Employer. Please complete this form in order for us to comply with the reporting requirements of the Equal Employment Opportunity Commission. This form will be separate from your employment application. This information on this form will not be used in any way in our selection process or for any personnel action following employment. It will be maintained in personnel files, which must be kept confidential under state law. Public disclosure of this information without your consent would be violation of state general statutes. Should you be made an offer of employment, you social security number will be required for wage reporting and drug screen.

Position Applied for _____

Name _____
Last First Middle

Date of Application _____

Sex () Male () Female

Ethnic Category

- () White - Origins in any of the peoples of Europe, North America, the Middle East
- () Black - Origins in any of the Black racial groups of Africa
- () Hispanic - Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture or origin regardless of race
- () Asian/Pacific Islander - Origins in the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands
- () American Indian/Alaskan/Native - Origins in any of the original peoples of North America

How did you learn of this opening?

- () Newspaper _____
- () City Website () Job posting at City Hall
- () From a current employee of the City
- () Other _____

OVERTIME COMPENSATION AGREEMENT

For employees subject to the overtime provisions of the Fair Labor Standards Act (FLSA), we generally require the employee to accrue compensatory time. However, if the board approves and the budget permits, employees may be paid overtime.

SELECTIVE SERVICE REGISTRATION

If male and age 18 to 28, have you registered for Selective Service? () Yes () No

If not, you will have 30 days to comply if selected for a position as required by Federal Law.