

APPLICATION FOR EMPLOYMENT

THE CITY OF UNION CITY IS AN EQUAL OPPORTUNITY EMPLOYER and does not discriminate on the basis of race, sex, color, religion, national origin, age, disability or veteran status in employment opportunities and benefits.

Overview of the hiring and employment process: This *Application* is but one part of the hiring and employment process. Other parts may include an interview, an employment examination or test, and a demonstration of an ability to perform the essential functions of the job. If you need an accommodation in order to complete any part of the hiring and employment process, please call the following number: 731-885-1341

Prior to completing this *Application* be sure to read the **JOB DESCRIPTION** of the position for which you are applying. As you complete the *Application*, please bear in mind the following:

- All applications for employment are a matter of public record
- We reserve the right to check all information for accuracy and completeness
- If you need accommodation in order to complete this *Application*, please notify the municipality

GENERAL INFORMATION

(PLEASE PRINT)

NAME: _____

DATE: _____

POSITION DESIRED: _____

DEPARTMENT: _____

Are You Applying For: _____ Fulltime _____ Part time _____ Seasonal

IF PART TIME, WHAT DAYS/HOURS ARE YOU AVAILABLE: _____

HAVE YOU EVER BEEN EMPLOYED BY THE CITY? _____ YES _____ NO

If so, please indicate position, department and dates of employment.

BASED ON THE JOB DESCRIPTION OF THE POSITION FOR WHICH YOU ARE APPLYING:

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU HAVE APPLIED? (note: you may later be asked to demonstrate your ability to perform the essential functions)? Yes No

PERSONAL DATA

NAME _____ SOC. SEC. # _____
last first middle

ADDRESS _____
number street

city state zip code

TELEPHONE NUMBER: () _____ Business: () _____

DO YOU HAVE A LEGAL RIGHT TO WORK IN THE U.S.?: (circle) Yes No

ARE YOU OVER THE AGE OF 18?: (circle) Yes No

HAVE YOU EVER BEEN CONVICTED OF A FELONY? (note: this may be relevant if job-related, but does not bar you from employment) (circle) Yes No

IF YES, PLEASE EXPLAIN: _____

DRIVER'S LICENSE NUMBER (if required by job): _____

EDUCATION AND TRAINING

HIGH SCHOOL ATTENDED: _____

city state

College/Universities Trade/Business School	City/State Zip Code	Degree Earned	Major Area of Study

MAJOR COURSE OF STUDY

OTHER TRAINING RECEIVED (special courses, work training programs, armed forces training, etc.....) _____

SPECIAL QUALIFICATIONS AND SKILLS (licenses, skills with machines, patents or inventions, publications) _____

EMPLOYMENT RECORD

List below all present and past employment information and/or substantive volunteer work beginning with the most recent position and ending with your first, if appropriate. Take time to fill in these blocks carefully, your qualifications depend in a large part on your employment history. Indicate if you are now unemployed or if you have never been employed.

May inquiries be made of your present employer regarding your qualifications and record of employment? (A "no" will not affect your consideration for employment.)

_____ Yes _____ No

Employer: <hr/> Address: <hr/> City/State/Zip Code: <hr/> Duties and Responsibilities: <hr/> Reason for Leaving: <hr/>	Title of Position: <hr/> From: To: <hr/> Supervisor: <hr/> Phone #: <hr/> Salary History: Starting Ending \$ _____ \$ _____
Employer: <hr/> Address: <hr/> City/State/Zip Code: <hr/> Duties and Responsibilities: <hr/> Reason for Leaving: <hr/>	Title of Position: <hr/> From: To: <hr/> Supervisor: <hr/> Phone #: <hr/> Salary History: Starting Ending \$ _____ \$ _____
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Have you any relative, either blood or by marriage, working for the City of Union City?
____ Yes ____ No

If so, give names and relationship: _____

REFERENCES

PLEASE LIST THREE PERSONS, OTHER THAN RELATIVES OR FORMER EMPLOYERS WHO HAVE KNOWLEDGE OF YOUR CHARACTER AND/OR ABILITIES.

NAME	MAILING ADDRESS (no., street, city, state)	YEARS KNOWN	PHONE NUMBER
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

IMPORTANT

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that falsified information or significant omissions may disqualify me and my application from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and accompanying resume, if any) to provide any information orally and/or in writing that may be requested to arrive at an employment decision and waive any right of privilege, privacy and/or confidentiality I may have in this information.

Applicant's Signature

Date