

City of American Falls STATE OF IDAHO EMPLOYMENT APPLICATION

An Equal Opportunity Employer M/F
-PLEASE PRINT-

Position desired: _____ Salary desired: _____ Today's date: / /

How were you referred to the City? Ad Agency Direct Contact Other (specify) _____

PERSONAL DATA

Last name: _____ First: _____ Middle: _____ Social Security No _____

Street: _____ Telephone: () _____

City: _____ State: _____ Zip: _____

Are you a U.S. citizen Yes No If no, country of citizenship _____ Type of Visa _____

Have you ever applied to or been employed by the City? Yes No If yes, when? _____

Have you served in the U.S. Armed Forces? Yes No If yes, branch served from / / to / /

Have you ever been convicted of a felony or job related crime (civilian or military)? Yes No If yes, explain: _____

Do you possess a mental or physical disability which would create a hazard to you or to others, or which might require accommodation in the job for which you are applying? (Ref. Section 503, Rehabilitation Act of 1973) Yes No If yes, explain: _____

Are there any types of positions for which you should not be considered or job duties you cannot perform because of a physical or mental handicap? Yes No If yes, what types of positions? _____

List of professional, technical, honorary, social or community organization to which you belong. (Organizations that may reflect race, national origin or religious preference need not be mentioned.) _____

EDUCATION, SKILLS & TRAINING

Type Degree	Major Field	Year Graduated	School Name & Location (City, State)	Dates attended (From/To)
Highest				
Next Highest				
Next Highest				
High School				

Other Applicable Courses

Course	Year	Description/Location	Duration

Type: Yes WPM Steno Yes WPM Adding machine Yes No Calculator Yes No

Specify other skills

EMPLOYMENT HISTORY

Start with your last position held including military experience and work back. A resume may be attached to describe your duties and scope of responsibility in each job.

Company	Employed from	/	/	to	/	/
Address	Telephone ()					
City	State	Zip				
Name & title of immediate supervisor	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Your title						
Starting base salary	Present or final base salary	Bonus or other compensation				
Reason for leaving						
Your duties and scope of responsibility	<input type="checkbox"/> Resume attached					

Company	Employed from	/	/	to	/	/
Address	Telephone ()					
City	State	Zip				
Name & title of immediate supervisor	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Your title						
Starting base salary	Present or final base salary	Bonus or other compensation				
Reason for leaving						
Your duties and scope of responsibility	<input type="checkbox"/> Resume attached					

REFERENCES

List two references that have knowledge of your qualifications for the position for which you are applying. Do not give relatives or former supervisors. The City upon written request will advise you of the result of any reference check.

Name	Telephone	<input type="checkbox"/> Home	<input type="checkbox"/> Office	Years known
Address	City	State	Zip	
Name	Telephone	<input type="checkbox"/> Home	<input type="checkbox"/> Office	Years known
Address	City	State	Zip	

STATEMENT

The data recorded by me on this application is true to the best of my knowledge and may be verified by the City. I understand that employment is contingent upon the accuracy of this information.

Signature _____

Date _____

It is the policy and practice of the City to recruit, hire and promote qualified applicants without regard to their race, color, religion, sex, age, national origin, handicap or other areas covered by federal, state or local fair employment laws and regulations.

To further this objective, the City has established procedures to ensure that all personnel actions such as compensation, benefits, transfers, city sponsored training and educational assistance, social and recreational programs and use of all city facilities are administered nondiscriminatorily without regard to race, color, religion, sex, age, national origin or handicap.