

# CITY OF EUPORA

## Employment Application

(Attach Resume if available)

Date of Application: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Name \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

(Any other name, such as nickname, maiden name, or assumed name, needed to verify contents of this application)

ADDRESS \_\_\_\_\_  
(NUMBER) (STREET) (CITY) (STATE) (ZIPCODE)

Telephone Number \_\_\_\_\_ Male ( ) Female ( )

Last Previous Address \_\_\_\_\_ No. residence in last five years \_\_\_\_\_  
(Street, P.O. Box or RFD No.)

How long have you lived in this vicinity? \_\_\_\_\_

Are you a U. S. citizen or lawfully in the U. S. and eligible for work? \_\_\_\_\_

If employed, will you provide documentation establishing that you may legally be employed in the U.S.? \_\_\_\_\_

Do you have transportation to and from work? \_\_\_\_\_ How? \_\_\_\_\_

Have you ever been convicted of a crime other than a minor traffic offense? If, yes, please explain. (A conviction will not necessarily bar you from employment. Factors such as the nature of the offense, how long ago it occurred, age, and rehabilitation will be considered in relation to job requirements.) Yes ( ) No ( )  
If answer is yes, explain: \_\_\_\_\_

### U. S. Military Experience

Have you served in the U. S. military? Yes ( ) No ( )  
Branch \_\_\_\_\_ Rank at Discharge \_\_\_\_\_ Date of active duty from \_\_\_\_\_ to \_\_\_\_\_  
Duties and Any Special Training \_\_\_\_\_

### Occupational and Educational Data

Job Wanted \_\_\_\_\_ What wage do you expect? \_\_\_\_\_  
Have you ever applied here before? \_\_\_\_\_ When are you available? \_\_\_\_\_  
What is your skill or trade? \_\_\_\_\_  
Operate what machines? \_\_\_\_\_  
Have you worked for the City of Eupora before? Yes ( ) No ( ) Where? \_\_\_\_\_ When? \_\_\_\_\_  
Supervisor \_\_\_\_\_ Why did you leave? \_\_\_\_\_

Education	Name & Address of School	Course	From	To	Last year attended & Grade Completed
Elementary	_____	_____	_____	_____	_____
High School	_____	_____	_____	_____	_____
Or Technical	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
Business or	_____	_____	_____	_____	_____
Correspondence	_____	_____	_____	_____	_____

References	DO NOT GIVE RELATIVES OR FORMER EMPLOYERS			
Personal Ref:	Address	Bus. Or Occup.	Home Phone	Bus.
Personal Ref:	Address	Bus. Or Occup.	Home Phone	Bus.
Personal Ref:	Address	Bus. Or Occup.	Home Phone	Bus.

List your last or present job first and then others in order back from that one. LIST ALL FORMER EMPLOYMENT.

Present or  
 Last Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Name of  
 Supervisor \_\_\_\_\_ Starting Date \_\_\_\_\_ Leaving Date \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 What work  
 Did you do? \_\_\_\_\_ Reason for  
 Leaving \_\_\_\_\_

Present or  
 Last Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Name of  
 Supervisor \_\_\_\_\_ Starting Date \_\_\_\_\_ Leaving Date \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 What work  
 Did you do? \_\_\_\_\_ Reason for  
 Leaving \_\_\_\_\_

Present or  
 Last Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Name of  
 Supervisor \_\_\_\_\_ Starting Date \_\_\_\_\_ Leaving Date \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 What work  
 Did you do? \_\_\_\_\_ Reason for  
 Leaving \_\_\_\_\_

Present or  
 Last Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Name of  
 Supervisor \_\_\_\_\_ Starting Date \_\_\_\_\_ Leaving Date \_\_\_\_\_ Rate of Pay \_\_\_\_\_  
 What work  
 Did you do? \_\_\_\_\_ Reason for  
 Leaving \_\_\_\_\_

**Payroll Tax and Insurance Information**

\*SOCIAL SECURITY NO. \_\_\_\_\_ \*Date of Birth \_\_\_\_\_  
 Number of Dependents \_\_\_\_\_

**List Immediate Family**

Relation	Name	Check Those Dependent On You	Age	Home Address	Place of Present Employment	Birth Date	How Long Employed
Spouse	_____						
Mother	_____						
Father	_____						
Brother	_____						
Sister	_____						
Children	_____						
Other members of Immediate Household: _____							

Emergency Notification- Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Give name & address of person  
 With permanent residence Address \_\_\_\_\_ Phone \_\_\_\_\_

**General Information**

Name of persons employed with this Company (if any) who can confirm the information on this application:  
 Name \_\_\_\_\_ How long known \_\_\_\_\_

**Statement of Understanding**

I understand the City of Eupora's need for complete and accurate information in making employment decisions, and certify that the information I have provided is true and complete to the best of my knowledge. I understand that any false or misleading statements or omissions on my part will be cause for rejection or dismissal.  
 I authorize the City of Eupora to contact my references and former employers except as I have indicated otherwise in this application, and to investigate all statements I have made herein, and I release both the City of Eupora and all parties contacted from any liability related to such investigation.  
 I recognize that the City of Eupora's willingness to receive my application for employment does not necessarily mean there are any positions currently available and agree that such acceptance does not obligate the City of Eupora in any way.  
 I understand that a pre-employment physical may be required and, if so, my employment may be contingent on the satisfactory outcome of that examination.  
 I understand as a condition of employment I may be called upon to undergo a drug screen at any time during my employment with the City of Eupora.  
 If I am employed, I agree to abide by City of Eupora policies, rules and regulations. I also recognize that my employment unless otherwise specified is not for any fixed duration, the City of Eupora reserves the right to make changes in my job from time to time, and that the City of Eupora and I have the freedom to terminate the employment relationship at any time either wishes to do so.

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Applicant