



# City of Sedgwick, Kansas

## Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or other legally protected status.

<b>Position Applying For:</b>	<b>Date of Application</b>
<b>Print Last Name, First name, Middle Initial:</b>	<b>Birth Date (optional)</b>
	<b>Social Security Number</b>
<b>Permanent Address:</b> _____ <b>City, State, Zip Code</b> _____	<b>Work phone</b>
<b>Home Phone ( )</b>	<b>E-mail Address</b>
<b>When will you be available to work?</b>	<b>Month</b> <b>Day</b> <b>Year</b>
<b>Comments:</b> _____ _____	

<b>KS Driver's License #</b> _____ <b>Exp</b> _____
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- If you are under 18 years of age, can you provide required proof of your eligibility to work?      Yes       No
- Have you ever been employed with us before?      Yes       No       No   
If Yes, give date \_\_\_\_\_
- Have you ever filed an application with us before?      Yes       No
- Are you currently employed?      Yes       No
- May we contact your present employer?      Yes       No
- Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration Status?      Yes       No   
(Proof of Citizenship or Immigration Status will be required upon employment)
- Are you currently on "lay-off" status and subject to recall?      Yes       No
- Can you travel if the job requires it?      Yes       No
- Have you been convicted of a felony within the last 7 years?      Yes       No   
Conviction will not necessarily disqualify an applicant from employment.  
If Yes, please explain \_\_\_\_\_  
\_\_\_\_\_

# EDUCATION

	Elementary School	High School	Undergraduate College/ University	Graduate / Professional
<b>School Name &amp; Location</b>				
<b>Years Completed</b>	4-5-6-7-8	9-10-11-12	1-2-3-4	1-2-3-4-
<b>Diploma/Degree/ Equivalent:</b>				
<b>Describe Course of Study:</b>				
<b>Describe any specialized training, apprenticeship, skills and extra- curricular activities</b>				
<b>State any additional information you feel may be helpful to us in considering your application</b>				
<b>List professional, trade, business, or civic activities and offices held.</b> You may exclude membership which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status: _____ _____ _____				

## References

**Give name, address and telephone number to three references who are not related to you and are not previous employers.**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Have you ever had any job-related training in the United States military?

Yes       No

If Yes, please describe \_\_\_\_\_

Are you physically unable to perform the duties of the job in which you are applying?

Yes       No

# Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

<b>Employer</b>		<u>Dates Employed</u> <u>From/ To</u>	<b>Work Performed</b>
Address			
Telephone number(s)			
Job Title	Supervisor		
Reason for Leaving			
<b>Employer</b>		<u>Dates Employed</u> <u>From/ To</u>	<b>Work Performed</b>
Address			
Telephone number(s)			
Job Title	Supervisor		
Reason for Leaving			
<b>Employer</b>		<u>Dated Employed</u> <u>From / To</u>	<b>Worked Performed</b>
Address			
Telephone number(s)			
Job Title	Supervisor		
Reason for Leaving			

# APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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

\_\_\_\_\_  
Date

## FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes  No

Remarks \_\_\_\_\_

Employed Yes  No  Date of Employment \_\_\_\_\_

INTERVIEWER DATE

Hourly Rate/  
Job Title \_\_\_\_\_ Salary \_\_\_\_\_ Department \_\_\_\_\_

By: \_\_\_\_\_

Name and Title

Date

### NOTES

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