

Employment Application

Applicant Information

Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Chauffer's License: YES NO CDL: A B C Driver's License Number: _____

Position Applied for: _____

Are you legally eligible for employment in the U.S.? YES NO
This organization participates in E-Verify.

Have you been convicted of a felony in the past 7 years? *Convictions will not necessarily disqualify an applicant from employment but will be considered for job relatedness.* YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

Years Completed: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

Years Completed: _____ Did you graduate? YES NO Degree: _____

Trade/Other: _____ Address: _____

Years Completed: _____ Did you graduate? YES NO Degree/License: _____

Special Skills and Qualifications

List any specialized training, apprenticeship, skills, or extra-curricular activities:

Military Service

Branch: _____ From: _____ To: _____

References

Please list three references, other than relatives.

Full Name: _____ Phone: _____

Email Address: _____

Full Name: _____ Phone: _____

Email Address: _____

Full Name: _____ Phone: _____

Email Address: _____

Previous Employment

Employer: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Employer: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Employer: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Disclaimer and Signature

APPLICANT'S ACKNOWLEDGEMENT:

I certify that the answers given in this application are true and complete to the best of my knowledge. I authorize investigation into all statements I have made on this application as may be necessary for reaching an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. 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.

In the event I am employed, I understand that any false or misleading information I knowingly provided in my application or interview(s) may result in discharge and/or legal action. I understand also that if employed, I am required to abide by all the rules and regulations of the employer.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, an 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 an authorized executive of this organization specifically acknowledges such change in writing.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

**CERTIFICATE OF APPLICANT AUTHORIZATION FOR RELEASE OF INFORMATION
(WAIVER OF RIGHTS TO HAVE POLICE RECORDS CHECKED)
(WAIVER OF RIGHTS FOR ALL MEDICAL & PSYCHOLOGICAL EXAMINATION RESULTS)**

I, (print full name) _____ hereby authorize all law enforcement agencies, the Veteran's Administration, any United States agencies, including military, all federal, state, or local government agencies, state and federal tax bureaus, credit bureaus, schools and universities, to furnish the holder of this release with any and all available information regarding me in order to determine my suitability for employment.

I authorize the holder of this release to make inquiries of my present and past employers, and co-workers regarding my character, integrity, reputation, and efficiency.

I authorize the release of any and all information regarding my employment, credit or any other information, whether personal or otherwise, that may or may not be on their records, and release said company or person from all liability from any damage whatsoever that may ensue from furnishing such information to the holder of this release. Any part of the undersigned application for employment may be released to any local, state, or federal law enforcement agency.

I also authorize the Human Resources Department of the City of Troy to have the Troy Police Department make a search to see whether or not I have any record of arrest and/or convictions anywhere in the United States, and that information can be given to the Director of Human Resources, as well as the Mayor of the City of Troy to become a part of my application for employment.

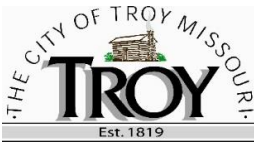
I authorize and agree to take any medical examination, psychological examination or test to determine the presence of drugs or narcotics which the City of Troy may require to determine my qualifications for employment. I do further authorize that the results of said tests be furnished to the City of Troy and the same shall become a part of my application for employment. Positive testing for the presence of any narcotic substance will result in my disqualification from further consideration for employment.

A photocopy of this Authorization shall be considered as effective as the original.

THIS AUTHORIZATION, YOUR APPLICATION AND ALL DOCUMENTS SUBMITTED BECOME THE PROPERTY OF THE HUMAN RESOURCES DEPARTMENT OF THE CITY OF TROY AND WILL NOT BE RETURNED.

Signature: _____ Date: _____

The City of Troy is an equal opportunity employer. We do not discriminate on the basis of race, religion, creed, gender, national origin, age, disability, marital or veteran status or any other legally protected status.



Employment Application

Voluntary Survey

The following information is to be used only in the review of the City of Troy’s programs on Equal Employment Opportunity. The information is kept separate from your employment application and in no way affects you as an individual applicant.

Please Note: This information is voluntary. Inclusion or exclusion of any data will not affect any employment decision.

Place an “X” by one or more of the following statements that apply to you.

Race:

- American Indian or Alaska Native (Having origins in any of the original peoples of North and South America, including Central America, and maintaining tribal affiliation or community attachment.)
Asian (Having origin in any of the original peoples of the Far East, Southwest Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.)
Black, African American, or Haitian (Having origins in any of the black racial groups of Africa.)
Native Hawaiian or other Pacific Islander (Having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
White (Having origins in any of the original peoples of Europe, the Middle East, or North Africa)

Ethnic Origin:

- Hispanic or Latino Origin (Of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)
Not of Hispanic or Latino Origin

Sex: Male Female

Vietnam Era Veteran: Yes No

Position for which you are applying:

Name: Date: