APPLICATION FOR EMPLOYMENT

Thank you for your interest in employment with the City of Slater. We are an equal opportunity employer and give employment and promotional consideration without regard to race, color, sex, religion, age, disability, disabled veterans, or veterans of the Vietnam era. We seek applicants for employment who are qualified, dedicated, hardworking and seek fulfilling employment.

PERSONAL INFORMAT	DATE					
NAME				SS#		
LAST	FIRST		MIDDLE			
PRESENT ADDRESS						
	STREET	CITY		STATE	ZIP	
HOW MAY WE REACH YOU?		HOME P	HONE NUMBE	R		
ALTERNATE NUMBER		EMAIL A	ADDRESS			
Are you 18 years or older?				Yes □	No □	
Are you a citizen of the United St	ates, or are you legally able	to work in the Uni	ted States?	Yes □	No □	
Have you ever been convicted of	a serious misdemeanor or fe	lony crime?		Yes □	No □	
EMPLOYMENT DESIRE POSITION	D 🗆 Full Time	☐ Part Time DATE Y		SALAR DESIRI		
TOSITION		IF SO M	IF SO MAY WE INQUIRE			
ARE YOU EMPLOYED NOW?		OR YO	UR PRESENT E	MPLOYER?		
EVER APPLIED TO THIS COMPANY BEFORE?		WHERI	WHERE?		WHEN?	
REFERRED BY						
INDICATE DATE OF THE PROPERTY						
EDUCATION	NAME AND LOCATIO	N OF SCHOOL	*NO OF YEARS ATTENDED	*DID YOU GRADUATE?	SUBJECTS STUDIED/ DEGREE OBTAINED	
GRAMMAR SCHOOL						
HIGH SCHOOL						
COLLEGE						
TRADE , BUSINESS OR CORRESPONDENCE SCHOOL						
GENERAL SUBJECTS OF SPECIAL STUD	Y OR RESEARCH WORK					
SPECIAL SKILLS						
ACTIVITIES: (CIVIC, ATHLET EXCLUDE ORGANIZATIONS, THE NAME OF		CREED, SEX, AGE, MAK	RITAL STATUS, COLO	R OR NATION OF ORGI	CIN OF ITS MEMBERS.	
U.S. MILITARY OR NAVAL SERVICE		RANK		SENT MEMBERS IONAL GUARD (

(CONTINUED ON OTHER SIDE)

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FC	DRMER EMPLOYERS	S (LIST BELO	W LAST THREE EMPLO	OYERS, STARTING WITH LAST OF	NE FIRST.)			
1. Dates of Employment: Nan			ne of Employer:	Position				
	From To	(54 54	7:\	Held:				
	Employer Address:	(Street, State,	Zip)	Phone Number:				
	Starting	Ending	Supervisor's	Reason For				
	Wages:	Wages:	Name:	Leaving:				
2.	Dates of Employment:	Nam	ne of Employer:	Position				
FromTo			Held:					
	Employer Address:	(Street, State,	Zip)	Phone				
_	Starting	Ending	Supervisor's	Number: Reason For				
	Wages:	Wages:	Name:	Leaving:				
3.	Dates of Employment:	Nam	ne of Employer:	Position				
From To			ic of Employer.	Held:				
Employer Address: (Street, State		, Zip)	Phone					
				Number:				
	Starting Wages:	Ending Wages:	Supervisor's Name:	Reason For Leaving:				
	Wages.	wages.	Tune.	Deaving.				
R	E FERENCES: GIVE	THE NAMES C	F THREE PERSONS NOT RE	LATED TO YOU, WHOM YOU HAVE K	NOWN FOR AT LEAST 1 YEAR.			
	NAME		PHONE	BUSINESS / RELATIONSHIP	YEARS ACQUAINTED			
1.								
2								
2.								
3.								
my rep und sub em cor inte def app rec	resume, other documents resentatives or agents to clarstand these questions maject to satisfactory verificated ployment consideration distributed and company policies erview or employment do national period of time and majerial period of time and time and time and majerial period of time and ti	or verbally obtain neck my reference ay pertain to my p tition of this information squalification or do s and procedures not create an emplay, regardless of t urrent file for thir onsideration	need during an employment interest by contacting any persons, contacting any persons, contaction and agree that deliberate dismissal from employment, if confidered the City of Slater, but realized toyment contract by implication ime and manner be terminated	or investigation of all statements and information view. I voluntarily consent to allow the City ompany of governmental entity they deem to und, work experience, character and behavior falsification of this document or significant discovered at a later date. I pledge, if hired to that company policies, procedures, practice in or otherwise. I further understand and agree by the company or myself with or without cast that period of time, it may be necessary to	y of Slater, Iowa. or any of its be an appropriate reference. I or. I understand my employment is a omissions shall be grounds for o comply with the guidelines of es or statements made during an ee that my employment is for no ause or previous notice. This complete another application to			
			DO NOT WRITE	BELOW THIS LINE				
				BELOW THIS ENVE				
<u>IN</u>	ΓERVIEWED Yes □	No □ IN	NTERVIEWED BY		DATE			
RE	MARKS (SEE INTERVI	EW EVALUATION	ON IF APPLICABLE)					
HI	RED Yes □	No □		POSITION FILLED				
<u>S</u> A	LARY/WAGE			DATE REPORTING FOR WO	RK			
	PROVED:							
<u> </u>	I KU (ED.	CHIEF EX	ECUTIVE OFFICER	CHIEF OPERATING OFFICE	R			

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OFFICE MANAGER

HIRING MANAGER