



Employment Application

Applicant Information

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

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ E-Mail: _____

Date Available: _____ Desired Salary: \$ _____

Position Applied For: _____

Where did you hear about this position?: _____

Are you a citizen of the United States?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever worked for the City?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, when?	_____	
Have you ever been convicted of a felony?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			

If yes, explain: _____

Driver's License Information

License Number: _____ Expiration Date: _____

Commercial Driver's License: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____



Previous Employment

Company: _____

Address: _____ Phone: _____

Job Title: _____ Supervisor: _____

Starting Pay: _____ Ending Pay: _____

Responsibilities: _____

Employed From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____

Address: _____ Phone: _____

Job Title: _____ Supervisor: _____

Starting Pay: _____ Ending Pay: _____

Responsibilities: _____

Employed From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No

Company: _____

Address: _____ Phone: _____

Job Title: _____ Supervisor: _____

Starting Pay: _____ Ending Pay: _____

Responsibilities: _____

Employed From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? Yes No



References

Please List three professional references

Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, please explain: _____

Why are you interested in employment with the City of Dexter?

Disclaimer and Signature

I hereby certify that all the information given is true and complete, and agree than any false information given during the hiring process may be grounds for denial of employment or immediate discharge if employed. The companies, schools, and persons listed may give information concerning me, and are released from all liability on my part.

Signature: _____ Date: _____