CITY OF ROCKWOOD
APPLICATION FOR EMPLOYMENT

NAME: _____

SOC SEC#: _____   DATE: _____

PRESENT ADDRESS: _____

| | Street | City | State | Zip |

PERMANENT ADDRESS: _____

| | Street | City | State | Zip |

PHONE #: _____   ARE YOU 18 YEARS OR OLDER: YES/ NO

ARE YOU A US CITIZEN OR AUTHORIZED TO WORK IN THE US?   YES/ NO

DO YOU HAVE A VALID DRIVER'S LICENSE?   YES/ NO   DATE OF BIRTH: _____

EMPLOYMENT DESIRED

POSITION: _____   DATE YOU CAN START: _____

ARE YOU EMPLOYED NOW?   YES/ NO   If so, may we inquire of your present employer? YES/ NO

HAVE YOU EVER APPLIED TO THE CITY BEFORE?   WHEN?_____

REFERRED BY: _____

EDUCATION   NAME/LOCATION OF SCHOOL   YRS ATTENDED   GRADUATE?   SUBJECTS STUDIED

Grammar School _____

High School _____

College _____

Trade/Business _____

SUBJECTS/STUDIES OR RESEARCH WORK _____

_____

SPECIAL SKILLS _____

ACTIVITIES/HOBBIES _____

US MILITARY SERVICE _____   RANK _____   PRESENT: _____

FORMER EMPLOYERS (LIST BELOW WITH THE MOST RECENT LISTED FIRST)

Date: Mo/Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From _____ To _____				
From _____ To _____				
From _____ To _____				

WHICH OF THESE JOBS DID YOU LIKE BEST? _____

WHAT DID YOU LIKE MOST ABOUT THIS JOB? _____

REFERENCES: NAMES OF THREE PERSONS NOT RELATED TO YOU

Name	Address	Business	Years Acquainted

The City of Rockwood does not and will not discriminate in employment and personnel practices on the basis of race, sex, age, handicap, religion, national origin or any other basis prohibited by applicable law. Hiring, transferring and promotion practices are performed without regard to the above listed items.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and pertinent information they may have and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.

DATE: _____

SIGNATURE: _____