

LA VERKIN CITY

Employment Application



Please Print – To Be Completed By Applicant

Date: _____

APPLICANT INFORMATION

Last Name:		First:	Middle:		
Current Address:			Apartment / Unit #		
City:	State:		ZIP:		
Home Phone:	Cell Phone:	Work Phone:			
Driver's License #:	State:	Expiration Date:			
Position Applied For:	Date Available:	Social Security #:			
E-mail:			Desired Rate / Salary: \$		
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 La Verkin City?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain:		
List any relatives who are presently or have been employed by La Verkin City:					
How were you referred to La Verkin City?			Please provide photocopy of driver's license.		

EDUCATION

High School:		City/State:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Diploma:
College:		City/State:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
Other:		City/State:			
From:	To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:

REFERENCES

PLEASE LIST THREE PROFESSIONAL REFERENCES. (PLEASE DO NOT INCLUDE RELATIVES OR FORMER EMPLOYERS)

(1) Full Name:	Relationship:
Company:	Phone:
Address:	Occupation:
(2) Full Name:	Relationship:
Company:	Phone:
Address:	Occupation:
(3) Full Name:	Relationship:
Company:	Phone:
Address:	Occupation:

PREVIOUS EMPLOYMENT (FROM MOST CURRENT EMPLOYMENT TO A MINIMUM OF THE LAST 5 YEARS)

(1) Company: 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

(2) Company: 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

(3) Company: 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

Use a separate sheet to list additional employers if necessary.

OTHER INFORMATION, SKILLS OR AWARDS YOU FEEL WOULD BENEFIT LA VERKIN CITY

WORK AVAILABILITY

Do you have objections to working overtime?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you work overtime without prior notice?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you work on Saturday?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you work on Sunday?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you travel if required by this position?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

DISCLAIMER AND SIGNATURE

La Verkin City is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, marital status, political belief, or disability. Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, green card, etc.) within three days of being hired. Failure to submit proof within the required time shall result in immediate termination.

I certify that my answers are true and complete to the best of my knowledge.

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

PLEASE ATTACH RESUME IF AVAILABLE

Signature: _____ Date: _____