CITY OF DALEVILLE EMPLOYMENT APPLICATION

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify the Personnel Clerk.

(1) Position applied for	(2) Date of Application
(3) Name (Last, First, Middle)	(4) Day-time Phone Number
(5) Address (Apt. # I Street)	(7) Evening Phone Number
(6) Address cont. (City, State, Zip)	(8) Mobile Phone Number
(9) Date available for employment	(10) Salary expected?

(11) Answer the following questions. Explain if necessary.

Question	Yes	No	Explanation
A. Are you willing to work different shifts?	☐	☐	
B. Are you legally eligible for employment in this country?	☐	☐	
C Have you ever been employed by the City of Daleville? If yes, give dates and position.	☐	☐	
D Can you perform the essential functions of this position? If no, what accommodations would you require to perform the essential functions of this position?	☐	☐	
E. Have you ever been convicted of an offense other than minor traffic violations? If yes - nature of offense, when & where.	☐	☐	

(12) EMPLOYMENT HISTORY

Instructions: Provide the following information about your past four (4) employers, assignments or volunteer activities. Start with the most recent.

Employer 1

Employer		Phone
Address (Street, City, State, Zip)		Job Title
Dates Employed From To	**Salary** Starting Ending	May we contact this employer for reference? ☐ Yes ☐ No
Job Duties		Supervisor
Reason for Leaving		

Employer 2

Employer		Phone
Address (Street, City, State, Zip)		Job Title
Dates Employed From To	**Salary** Starting Ending	May we contact this employer for reference? ☐ Yes ☐ No
Job Duties		Supervisor
Reason for Leaving		

Employer 3

Employer		Phone
Address (Street, City, State, Zip)		Job Title
Dates Employed From To	**Salary** Starting Ending	May we contact this employer for reference? ☐ Yes ☐ No
Job Duties		Supervisor
Reason for Leaving		

Employer 4

Employer		Phone
Address (Street, City, State, Zip)		Job Title
Dates Employed From To	**Salary** Starting Ending	May we contact this employer for reference? ☐ Yes ☐ No
Job Duties		Supervisor
Reason for Leaving		

(13) SKILLS AND QUALIFICATIONS

Instructions: Summarize any training, skills, licenses and certificates that may qualify you as being able to perform job related functions in the position for which you are applying.

(14) EDUCATION

School	Name	Address	Degree (if any)	Date of degree	Field of study	GPA
High School						
College						
Other						

(15) REFERENCES

Instructions: List 3 references that we may contact to verify your Employment Application. References should not be close friends or relatives.

Reference	Name	Address	Phone	Job Title	Years Known
1					
2					
3					

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and Signed by the Mayor and City Council.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an 1-9 Form in this regard.

I understand that a pre-employment physical exam, drug screening and background check is required.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

I certify that I have read, fully understand and accept all terms of the foregoing Application Statement.

Applicants Signature	Date