

## CITY OF FORT MITCHELL, KENTUCKY APPLICATION FOR EMPLOYMENT

We do not discriminate on the basis of race, color, religion, national origin, sex, age, or disability. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

If you need an accommodation to complete the application process, contact the City Clerk at 859-331-1212.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE TYPE OR PRINT, except for signature. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Job Applied for \_\_\_\_\_ Today's Date \_\_\_\_\_

Are you seeking:    Full-time        Part-time        Temporary        employment?

Last Name	First Name	Middle Name	Telephone Number
Present Street Address		City	State      Zip Code
E-mail Address			
Are you 18 years of age or older? (If you are hired, you may be required to submit proof of age.)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If hired, can you furnish proof you are eligible to work in the U. S.		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever applied here before?		Yes <input type="checkbox"/>	No <input type="checkbox"/> If yes, when? _____
Were you ever employed here?		Yes <input type="checkbox"/>	No <input type="checkbox"/> If yes, when? _____
Have you ever been convicted of any law violation (except a minor traffic violation)?    Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, give details _____ (A "Yes" answer does not automatically disqualify you from employment, since the nature of the offense, date, and the job for which you are applying is also considered. In addition, pursuant to KRS 335B.020, no person shall be disqualified from public employment solely because of a prior conviction of a crime, unless the crime for which convicted directly relates to the position of employment sought.)			
Are you now or do you expect to be engaged in any other business or employment?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please explain _____			

## EDUCATION

List Name and Address of Schools

	Number of Years Completed	Diploma/ Degree / Certificate
High School or GED: _____		
College or University: _____ Subjects Studied: _____		
Vocational or Technical: _____ Subjects Studied: _____		
Graduate and/or other education: _____ _____ _____		

## MILITARY RECORD

Branch of U.S. Military Service from (month/year) to (month/year): \_\_\_\_\_

Highest Rank Attained: \_\_\_\_\_

Military Occupation Specialty and/or Major Duties: \_\_\_\_\_  
\_\_\_\_\_

Honors or Awards: \_\_\_\_\_

## WORK HISTORY

List names of employers in consecutive order with present or last employer first. Account for all periods of time including military service and periods of unemployment. If self-employed, give firm name and supply business references. **PLEASE GIVE MONTH AND YEAR.**

Name of Employer:	Supervisor:
Address:	Employed: From (mo/yr) / To (mo/yr)
City, State, Zip Code:	Pay: Start \$                      Final \$
Title:	Reason for Leaving:
Duties:	

<b>Name of Employer:</b>	Supervisor:
Address:	Employed: From (mo/yr) / To (mo/yr)
City, State, Zip Code:	Pay: Start \$ Final \$
Title:	Reason for Leaving:
Duties:	
<b>Name of Employer:</b>	Supervisor:
Address:	Employed: From (mo/yr) / To (mo/yr)
City, State, Zip Code:	Pay: Start \$ Final \$
Title:	Reason for Leaving:
Duties:	
<b>Name of Employer:</b>	Supervisor:
Address:	Employed: From (mo/yr) / To (mo/yr)
City, State, Zip Code:	Pay: Start \$ Final \$
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City, State, Zip Code:	Pay: Start \$ Final \$
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Duties:	
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Address:	Employed: From (mo/yr) / To (mo/yr)
City, State, Zip Code:	Pay: Start \$ Final \$
Title:	Reason for Leaving:
Duties:	

**REFERENCES**

Have you worked or attended school under any other names? Yes  No   
If yes, give names: \_\_\_\_\_

Are you presently employed? Yes  No   
If yes, whom do you suggest we contact? \_\_\_\_\_

Have you ever been fired or asked to resign? Yes  No   
If yes, please explain: \_\_\_\_\_

Give three personal references, not relatives or former employers.

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**AFFIDAVIT**

**PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING**

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

I authorize investigation of all statements contained in this employment application and additional job-related background investigation as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

I understand that neither this document nor any verbal promises made by the employer or representative employee may be constituted as an employment contract.

I understand and acknowledge that, unless otherwise defined by law, policies and procedures, or rules and regulations, any employment relationship with the City is of an "at-will" nature, which means that either the employee or employer may terminate the employment relationship at any time, with or without cause or advance notice.

I understand that this application is the property of the employing City. This application must be signed and dated below before I will receive consideration for employment.

I have read, understand, and by my signature consent to these statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This application for employment will remain active for a limited time. Ask the City representative for details.