## 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 jobrelated 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 al 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	e	
Employment Type: Full-time Part-time	Temporary	Volunteer		
Total Name	M. I.I. N	Televi		
Last Name First Name	Middle Name	Telepho	one Number	
Present Street Address	City	State	Zip Code	
Are you 18 years of age or older?  (If you are hired, you may be required to submit proof of age.)				
If hired, can you furnish proof you are eligible to work in the	e U. S. Yes	No 🗌		
Were you ever employed here? Yes	No If yes, when?			
Have you ever been convicted of any law violation (except a minor traffic violation)? Yes \( \square \) No \( \square \)			No 🗌	
If yes, give details	talify you from employnth pplying is also considered from public employnthich convicted directly raisiness or employment?	ed. In addition, nent solely becau	pursuant to use of a prior	

EDUCATION List Name and Address of Schools		Number of Years Completed	Diploma/ Degree / Certificate		
High School or GED:		ı			
College or University:					
Subjects Studied:					
Vocational or Technical:					
Subjects Studied:					
Certifications and/or other education:					
MILITAR	Y RECORD				
Branch of U.S. Military Service from (month/year) to(mont	h/year):				
Highest Rank Attained:					
Military Occupation Specialty and/or Major Duties:					
Honors or Awards:					
WORK HISTORY(MAY INCLUDE VOLUNTEER POSITIONS)					
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.					
Name of Employer:	Supervisor:				
Address:	Employed: From (mo/yr)	/ To (mo/yr)			
City, State, Zip Code:	Pay:	Final \$			
Title:	Reason for Leaving:	rmar φ			
Duties:	,				

Name of Employer:	Supervisor:
Address:	Employed: From (mo/yr) / To (mo/yr)
City, State, Zip Code:	Pay: Start \$ Final \$
Title:	Reason for Leaving:
Duties:	
Name of Employer:	Supervisor:
Address:	Employed: From (mo/yr) / To (mo/yr)
City, State, Zip Code:	Pay: Start \$ Final \$
Title:	Reason for Leaving:
Duties:	
Name of Employer:	Supervisor:
Address:	Employed: From (mo/yr) / To (mo/yr)
City, State, Zip Code:	Pay: Start \$ Final \$
Title:	Reason for Leaving:
Duties:	
Name of Employer:	Supervisor:
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?  If yes, give names:	Yes 🗌	No 🗌
Are you presently employed?  If yes, whom do you suggest we contact?	Yes 🗌	No 🗆
Have you ever been fired or asked to resign?  If yes, please explain:	Yes 🗌	No 🗆
Give three references, not relatives. Include Name, Email, Ph		d Relationship
2.		
3.		
		nng.
What skills or additional training do you have that are related to the job for which you are applying?		
What machines or equipment can you operate that are related to the job for which you are applying?		
Is there any other information you would like to share (ie. Awar	rds, etc.).	
<b>For Driving Jobs ONLY</b> : Do you have a valid driver's license		
Have you had your driver's license suspended or revoked in the	last three yea	ars? Yes No

## **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.		