

Application of Employment

TRADITIONAL VALUES, PROGRESSIVE IDEAS

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

The City of Buhler reserves the right to require various pre-employment screenings prior to any final offer of employment. These screenings may include, but are not necessarily limited to: driving record; background investigation, including polygraph; and medical, including drug testing. In addition, some positions may require drug testing as a continuing condition of employment.

		(PLEASE PRINT)						
Position(s) Applied For: How did you learn about us?			Date of appl	ication:				
Advertisement	☐ Friend	☐ Inquiry						
☐ Employment Agency	☐ Relative	☐ Other _						
Last Name:		Middle Nar	me:					
Address:	Cit	y:	State:	Zip Code:				
Home Phone:()	Cell Phone: ()	Email:						
Best time to contact you at ho	ome is		<u> </u>	: 🗆 A.M.	□ P.M.			
If you are under 18 years of age, can you provide required proof of your eligibility to work?								
Have you ever been employed with us before?								
If yes, please provid	le date:							
Are you a member of the mili	itary or ever served in the	Armed Forces?		🗆 Yes	□ No			
Are you currently employed?	🔲 Yes	☐ No						
May we contact your present employer?								
May we contact your present employer?								
Proof of citizenship or immigration status will be required upon employment.								
On what date would you be available for work?								
How many hours are you ava								
Are you currently on "lay off" status and subject to recall?								
Do you have a dependable means of transportation to and from work?								
Have you ever been convicted of a felony? (conviction will not necassarily disqualify an applicant from employment) \(\sigma\) Yes								
Ş	,	, , , , , , , , , , , , , , , , , , , ,	•					
Do you have a valid Driver's Lice	ense			🗆 Yes	□No			
,								
If yes, License #		State:						
Class □A □	в □с □ □	Other:						



Application of Employment

Education	Name & Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				
escribe any specialized trai onsidering your application	ining, apprenticeship, skills, job-relat ı.	ted trainings, or anything tha	t you feel may be	helpful to us in
	<u> </u>			
Employment Experience	e			
	or last job. Include any job related m	ilitary service assignments ar	nd volunteer activ	vities. You mav exclude
	cate race, color, religion, gender, nat			
Employer:	Address:			
	Job Title:			
	Hourl			nding:
, ,		•		
Employer:	_ Address:_			
• •			Supervisor:	
	job Title		· ·	
	Hourl			
, ,	110011	•		_
Employer:	Address:			
	Job Title:			
Reason for Leaving:				
incusori for Ecaving				
	Hourl			



References

Application of Employment

Name:		Phone Number:
Address:		
Name:		Phone Number:
Name:		Phone Number:
Address:		
Applicant's Stat	ement	
application for empl		my knowledge. I authorize investigation of all statements contained in this oyment decision. (I hereby authorize the necessary authorities, as needed, to nd driving record.
employment beyond acknowledge that, ui that the Employee m will" employment rel an authorized execu	I this time period should inquire as to whether or r nless otherwise defined by applicable law, any emp nay resign at any time and the Employer may disch lationship may not be charged by any written docu tive of this organization. In the event of employme	of time not to exceed 45 days. Any applicant wishing to be considered for not applications are being accepted at that time. I herby understand and oloyment relationship with this organization is of an "at will" nature, which means arge Employee at any time with or without cause. It is further understood that "at ment or by conduct unless such change is specifically acknowledged in writing by not, I understand that false or misleading information given in my application or end to abide by all rules and regulations of the employer.
	Signature of Applicant:	Date: