

**City of Highland Haven**  
**EMPLOYMENT APPLICATION**

*We consider applicants 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.*

**PLEASE PRINT**

Position Applied for: \_\_\_\_\_ Date of Application: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Full Name: \_\_\_\_\_  
(Last, First, MI):

Address: \_\_\_\_\_  
(Number, Street, City, State, Zip)

Telephone Numbers: \_\_\_\_\_  
(Home, Cell or Alternative Number)

Social Security Number: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Best time to contact you at home is: \_\_\_\_\_ Email: \_\_\_\_\_

**(CIRCLE ONE)**

If you are under 18 years of age, can you provide required proof of your eligibility to work?      Yes      No

Do any of your friends or relatives that work here? .....      Yes      No

Are you currently employed? .....      Yes      No

May we contact your present employer? .....      Yes      No

Are you prevented from lawfully becoming employed in this country because of  
Visa or Immigration Status? .....      Yes      No

*Proof of Citizenship of immigration status will be required upon employment.*

Have you ever been convicted of a felony? .....      Yes      No

Date available to start work: \_\_\_\_\_

Are you available to work?

\_\_\_\_\_ Full-Time ..... Yes      No

\_\_\_\_\_ Part-Time (Please indicate Morning or Afternoon) ..... Yes      No

\_\_\_\_\_ Temporary (Please indicate dates available) ..... Yes      No

Can you travel if a job requires it? ..... Yes      No

**Education:**

**High School**

Name/Address \_\_\_\_\_

Years Attended \_\_\_\_\_

Diploma? ..... Yes      No

**Undergraduate College**

Name/Address \_\_\_\_\_

Years Attended \_\_\_\_\_

Diploma? (If Yes, what was you major/minor) \_\_\_\_\_ Yes      No

*City of Highland Haven*  
**EMPLOYMENT APPLICATION**

**Graduate College**

Name/Address \_\_\_\_\_

Years Attended \_\_\_\_\_

Diploma? (If Yes, what was you major/minor) \_\_\_\_\_ Yes No

**Professional School**

Name/Address \_\_\_\_\_

Years Attended \_\_\_\_\_

Diploma? (If Yes, what was you major/minor) \_\_\_\_\_ Yes No

**Describe any specialized training, apprenticeship, skills and extra-curricular activities:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe any job-related training received while in United States military service:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT EXPERIENCE**

Start with your present/last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

**1. Employer:** \_\_\_\_\_

Address: \_\_\_\_\_

Number Street City State Zip \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates employed: from \_\_\_\_\_ to \_\_\_\_\_

Work performed: \_\_\_\_\_

\_\_\_\_\_

Hourly Rate/Salary: \$ \_\_\_\_\_ to \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

*City of Highland Haven*  
**EMPLOYMENT APPLICATION**

**2. Employer:** \_\_\_\_\_

Address: \_\_\_\_\_

Number Street City State Zip \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates employed: from \_\_\_\_\_ to \_\_\_\_\_

Work performed: \_\_\_\_\_

\_\_\_\_\_

Hourly Rate/Salary: \$ \_\_\_\_\_ to \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**3. Employer:** \_\_\_\_\_

Address: \_\_\_\_\_

Number Street City State Zip \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates employed: from \_\_\_\_\_ to \_\_\_\_\_

Work performed: \_\_\_\_\_

\_\_\_\_\_

Hourly Rate/Salary: \$ \_\_\_\_\_ to \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**4. Employer:** \_\_\_\_\_

Address: \_\_\_\_\_

Number Street City State Zip \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates employed: from \_\_\_\_\_ to \_\_\_\_\_

Work performed: \_\_\_\_\_

\_\_\_\_\_

Hourly Rate/Salary: \$ \_\_\_\_\_ to \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

*City of Highland Haven*  
**EMPLOYMENT APPLICATION**

**List professional, trade, business or civic activities and offices held.**

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

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**ADDITIONAL INFORMATION**

**Summarize special job-related skills and qualifications acquired from employment or other experience.**

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**Explain your computer and software experience** (continue on the back)

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**Explain your experience with office equipment** (continue on the back)

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**State any additional information you feel may be helpful to us in considering your application.**

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*City of Highland Haven*  
**EMPLOYMENT APPLICATION**

**REFERENCES:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

=====

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

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Have you ever been convicted of a felony or other crime or been the subject of a deferred adjudication? \_\_\_\_\_ yes \_\_\_\_\_ no (If yes, please explain on the reverse side of this page.)  
*Conviction will not necessarily disqualify an applicant from employment. The seriousness of the crime, the date of conviction, and the relevance of the crime to this position will be considered.*

Driver's License # or alternate identification #: \_\_\_\_\_ State \_\_\_\_\_

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**APPLICANT'S STATEMENT:**

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the City of Highland Haven is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Board of Alderman.

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.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date