APPLICATION FOR EMPLOYMENT _____AN EQUAL OPPORTUNITY EMPLOYER_



City of Genesee

140 E. Walnut P. O. Box 38 Genesee, Idaho 83832 (208) 285-1621 phone (208) 285-1382 fax

Equal access to programs, services and employment is available to all persons. Those applicants requiring accommodation to the application and/or interview process should contact the City Clerk.

Please Print or Type Position(s) applied for	Date of application/ /
Referral Source:	
Advertisement Employee Relative	Government Employment Agency
Walk-in Private Employment Agency	Internet Web Site Other
Name of Source (if applicable)	
Name	
	First Middle
Address Street City	State Zip Code
Telephone Number () If necessary, b	pest time to call you at home is am/pm
May we contact you at work? Yes No If Yes, g	jive work number ()
Have you filed an application here before?	∐ No
If yes, give date/ and position applied f	or:
Have you ever been employed here before? Yes No	If Yes, give dates/_/
Are you legally eligible for employment in this country?	Yes No
Date available for work/ Are you on	layoff and subject to recall? Yes No
Are you able to meet the attendance requirements of the po	sition? Yes No
Will you work overtime if required? Yes No Have	e you ever been bonded? Yes No
Do you have a valid drivers license (if job related)?	es
Have you been convicted of a felony in the last seven (7) ye	ars? Yes No
(such conviction may be relevant if job related, but does not	bar you from employment.)
If Yes, please explain	

Employment History

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in the comments section below.

Current Employer	Telephone	Dates Employed		Summarize the nature of the work			
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A. School	B. Years	C. Degree	D. Major	E. Minor
	Completed	Completed	D. major	L. IIIIIO
kills and Qualificatieing able to perform job-relate				that may qualify you as
References - List name				
re <i>not</i> previous supervisors. I	r not applicable, list thr ame	ee school or personal	Telephone	not related to you. Years Knowi
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List any additional information you would like us to consider.

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the City of Genesee's service if I have been employed.

I give the City of Genesee the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the City of Genesee and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The City of Genesee is an Equal Opportunity Employer. The City of Genesee does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

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

I understand it is the City's policy not to refuse to hire a qualified individual because of this person's need for an accommodation that would be required by the ADA.

Signature of Applicant	Date	/	/

All applicants will be notified following the review of all applications. Please do not call to find out if you have been selected for an interview.