
EMPLOYMENT HISTORY

Former Employment (List employers, starting with the current or most recent. Explain all gaps in time of employment.)

Company Name: _____ Job Title: _____

Address: _____
Number Street City State Zip

Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____ Rate of Pay: _____

Detailed Job Duties: _____
_____Reason for Leaving: _____

Company Name: _____ Job Title: _____

Address: _____
Number Street City State Zip

Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____ Rate of Pay: _____

Detailed Job Duties: _____
_____Reason for Leaving: _____

Company Name: _____ Job Title: _____

Address: _____
Number Street City State Zip

Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____ Rate of Pay: _____

Detailed Job Duties: _____
_____Reason for Leaving: _____

May we contact your former employers to verify this information?

Yes No May we contact your present employer? Yes No

The law prohibits discrimination in hiring due to age, race, color, creed, sex, national origin, religion, disability or veteran's status.
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Please provide any additional information about your abilities or interests that makes you a good candidate for this position:

I authorize investigation of all statements contained in the application. I understand that omission or misrepresentation of facts is cause for dismissal.

Signature: _____

Date: _____

DRIVING RECORD AUTHORIZATION AND RELEASE FORM

I, _____ hereby authorize the City of Evansdale to conduct a search of my driving record annually. The City in consultation with its insurance carrier shall annually review the driving record of employees who are required to drive City vehicles or be reimbursed for use of their own vehicles and reserves the right to revoke an employee’s access and ability to operate a City vehicle because of insurability reasons.

FULL NAME: _____

(first)

(middle name)

(last)

DRIVERS LICENSE NUMBER: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____ (MM/DD/YY)

I voluntarily disclose the following **convictions** on my driving record. (To the best of your ability, please explain what you were convicted of - speeding, OWI, theft, domestic abuse etc. Include date of violation, charge and disposition):

Signature

Date

Signature of City Clerk requesting search

Date