



Application for Employment

City of Presque Isle

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(s) applied for: _____ Date of application: _____

Last name: _____ First name: _____ Middle initial: _____

Address: _____
Number Street City State Zip

Telephone number(s): _____

How did you learn about us?

- | | | |
|--|-----------------------------------|----------------------------------|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Friend | <input type="checkbox"/> Walk-In |
| <input type="checkbox"/> Employment Agency | <input type="checkbox"/> Relative | <input type="checkbox"/> Other |

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

Have you ever filed an application with us before? Yes No
If Yes, give date _____

Have you ever been employed with us before? Yes No
If Yes, give date _____

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 or immigration status will be required upon employment.

On what date would you be available for work?

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain

Education

	Name and Address of School	Course of Study	Years Completed
Diploma			
Degree			
Elementary School			
High School			
Undergraduate College			
Graduate Professional			
Other (Specify)			

Indicate any foreign languages you can speak, read and/or write:

	Fluent	Good	Fair
Speak			
Read			
Write			

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

Describe any job-related training received in the United States military:

Employment Experience

Start with your present or 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.

<i>Employer</i>	<i>Dates Employed</i>		<i>Work Performance</i>
	<i>From</i>	<i>To</i>	
<i>Address</i>			
<i>Telephone number(s)</i>	<i>Hourly Rate/Salary</i>		
	<i>Starting</i>	<i>Final</i>	
<i>Job Title</i>			
<i>Supervisor</i>			
<i>Reason for leaving</i>			

<i>Employer</i>	<i>Dates Employed</i>		<i>Work Performance</i>
	<i>From</i>	<i>To</i>	
<i>Address</i>			
<i>Telephone number(s)</i>	<i>Hourly Rate/Salary</i>		
	<i>Starting</i>	<i>Final</i>	
<i>Job Title</i>			
<i>Supervisor</i>			
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<i>Employer</i>	<i>Dates Employed</i>		<i>Work Performance</i>
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<i>Telephone number(s)</i>	<i>Hourly Rate/Salary</i>		
	<i>Starting</i>	<i>Final</i>	
<i>Job Title</i>			
<i>Supervisor</i>			
<i>Reason for leaving</i>			

<i>Employer</i>	<i>Dates Employed</i>		<i>Work Performance</i>
	<i>From</i>	<i>To</i>	
<i>Address</i>			
<i>Telephone number(s)</i>	<i>Hourly Rate/Salary</i>		
	<i>Starting</i>	<i>Final</i>	
<i>Job Title</i>			
<i>Supervisor</i>			
<i>Reason for leaving</i>			

If you need additional space, please continue on a separate sheet of paper.

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.

Applicant’s Statement:

I certify that answers given herein are true and complete to the best of my knowledge. I authorize the City the ability to investigate all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment is active for the job vacancy currently being applied for. However, the application is required to be kept on file for one year. During that time should another job vacancy be advertised that I am interested in, I may either reapply or call the Resources Director’s office to have this application re-activated. I understand that this application will not be automatically re-activated for future openings.

In the event of employment, I understand that false and 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 City.

Signature of Applicant _____

Date _____

Applicants – Please read and respond to the following:

The City of Presque Isle has an anti-nepotism clause in the personnel rules and regulations. This policy can affect your ability for employment with the City. This policy covers all departments within the City. Those departments are: City Hall, Airport, Fire, The Forum, Library, Police, Public Works, Recreation and Parks (including Indoor Pool), and Solid Waste (including Landfill and Recycling Center).

The following list of relatives are the ones that would prevent you from obtaining employment with the City:

- | | | |
|---------------------|-----------------------|------------------------|
| <i>Spouse</i> | <i>Father-in-law</i> | <i>Son-in-law</i> |
| <i>Parent</i> | <i>Mother-in-law</i> | <i>Daughter-in-law</i> |
| <i>Sibling</i> | <i>Sister-in-law</i> | <i>Grandparent</i> |
| <i>Child</i> | <i>Brother-in-law</i> | <i>Grandchild</i> |
| <i>Half-brother</i> | <i>Half-sister</i> | |

Also included are relationships arising from adoption, or corresponding “step” relations. Also, this policy will include couples who at common law, would be regarded as partners in a

common-law marriage.

There are a few exceptions to the policy, such as no other qualified applicants, not in the same department and less than full-time employment, these are a couple of examples. Please feel free to fill out the application and return, in the instance any of the exceptions apply.

Your signature on this form acknowledges that you are aware of this anti-nepotism policy and that you are certifying at the time of your signature that no such relationship exists as described above between yourself and any City employee.

Signature of Applicant _____ Date _____

Any candidate giving any false information regarding the above may be terminated. A copy of the entire anti-nepotism policy is available in the Resource Management Office, City Hall.

**Equal Opportunity Employment Statement
Employment Data Record**

The City of Presque Isle is an Equal Opportunity Employer and shall not discriminate against an employee or applicant for employment because of race, creed, religion, gender, age, marital status, national origin, disability, veteran status or any other legally protected status, unless based upon a bona fide occupational qualification.

As an employer with an Affirmative Action Program, we comply with government regulations, including Affirmative Action responsibilities where they apply.

The purpose of this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic reports are made to the government on the information below. The completion of this Data Record is optional. If you choose to volunteer the requested information, please note that all Data Records are kept in a confidential file and are not a part of your Application for Employment or personnel file. **INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.**

Our Equal Opportunity Officer is Martin Puckett, Deputy City Manager. Concerns pertaining to equal opportunity employment should be directed to his office, located in City Hall, 3rd floor, or by calling his office at 760-2700.

Voluntary Survey:

Name: _____ Date: _____
(Please print)

Government agencies at times require periodic reports on the sex, ethnicity, disabled, veteran and other protected status of employees. This data is for statistical analyses for our Affirmative Action Program and EEOC reporting.

Applicant name: _____

Address: _____

Town/City: _____ State: _____ Zip: _____

Check one: _____ Male _____ Female

Check one of the following for ethnic origin:

_____ White _____ Hispanic _____ American Indian/Alaskan Native
_____ Black _____ Other _____ Asian/Pacific Islander

Check if any of the following are applicable:

_____ Vietnam Era Veteran _____ Disabled Veteran
_____ Disabled Individual

Birth date: _____