



CITY OF GERING APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination based on creed, color, sex, age, national origin, handicap, veteran status, sexual orientation, or any condition prescribed by state or local law.

Last Name _____ First _____ Middle _____ Date _____

Street Address (physical and mailing) _____ Home Telephone: _____

City _____ State _____ Zip _____ Cellular Telephone: _____

Have you ever applied for employment with us? _____ Date Available to Begin Work: _____

No Yes If yes, date: _____

Position Desired: _____ Pay Expected: _____

Apart from absence for religious observance, what hours are you available? _____ Are you legally eligible for employment in the United States? Yes No

- Full-Time Seasonal
 Part-Time Overtime (if requested)

Have you ever been bonded? No Yes

Have you been convicted of any crimes in the past ten years, excluding misdemeanors and summary offenses, which have not been annulled, expunged, or sealed by a court? No Yes

If yes, please describe in full: _____

Membership in professional and civic organizations (Exclude those that may disclose your race, color, religion, age, or national origin.)

Other special training or skills (languages., machine operations, etc.), special accomplishments or awards

School	Name of School	Location of School	Course of Study	Did you Graduate	Years Completed	Degree or Diploma
High School						
Business/Trade/Technical						
College						
Graduate						

MILITARY Did you serve in the U.S. Armed Forces? Yes No If "Yes", in what Branch? _____

Describe any training received relevant to the position for which you are applying: _____

References we may contact:

Name _____ Years known _____ Telephone _____ Business _____

Name _____ Years known _____ Telephone _____ Business _____

Name _____ Years known _____ Telephone _____ Business _____

EMPLOYMENT Please give accurate, complete, full-time and part-time employment records. Start with your present or most recent.

Company Name _____	Telephone: _____
Address _____	Starting Pay: _____
Supervisor's Name _____	Ending Pay: _____
Job Title: _____	Employment Dates:
Describe Your Work: _____	From: _____
	To: _____
Reason for Leaving: _____	

Company Name _____	Telephone: _____
Address _____	Starting Pay: _____
Supervisor's Name _____	Ending Pay: _____
Job Title: _____	Employment Dates:
Describe Your Work: _____	From: _____
	To: _____
Reason for Leaving: _____	

Company Name _____	Telephone: _____
Address _____	Starting Pay: _____
Supervisor's Name _____	Ending Pay: _____
Job Title: _____	Employment Dates:
Describe Your Work: _____	From: _____
	To: _____
Reason for Leaving: _____	

We may contact the employers listed above unless you indicate those you do not want us to contact.

Do Not Contact: Employer: _____
Reason: _____

Please read and understand this statement before signing your application:

The information provided in this Application for Employment is true. False, incomplete, or misrepresented information will be sufficient cause for my application to be rejected, or, if discovered after employment, cause for immediate termination of my employment.

I authorize the employer to obtain information about me from previous employers, educational institutions, and other parties to verify the accuracy of information in this application, a related employment resume, or personal interview. I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons who provide information for this purpose.

This application will expire in 30 days. Unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

I accept all terms and conditions in the above statement.

Signature

Date

Please return to City of Gering Administration Offices, 1025 P Street, Gering, NE 69341

Fax: 308-436-6899