



### 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 Name Middle Date

\_\_\_\_\_  
Street Address (physical & mailing address) Home Telephone

\_\_\_\_\_  
City State Zip Code Cell Number

Have you ever applied for employment with us? \_\_\_\_\_  
\_\_\_ Yes \_\_\_ No If yes, dates: \_\_\_\_\_ Date available to begin work: \_\_\_\_\_

Position desired: \_\_\_\_\_ Pay expected: \_\_\_\_\_

What hours are you available?  
\_\_\_\_\_ Full Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Seasonal \_\_\_\_\_ Overtime (if requested)

Are you legally eligible for employment in the United States? \_\_\_ Yes \_\_\_ No

Membership in professional and civic organization (Exclude those that may disclose your race, color, religion, age or National origin.) Other special training or skills (languages, machine operation, etc.), special accomplishment 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 School						
College/University						
Graduate School						

Military Service: Did you serve in the U.S. Armed Forces? \_\_\_ Yes \_\_\_ No

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

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_  
Job Title \_\_\_\_\_  
Describe your work \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_  
Starting Pay \_\_\_\_\_  
Ending Pay \_\_\_\_\_  
Employment Dates:  
From: \_\_\_\_\_  
To: \_\_\_\_\_

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_  
Job Title \_\_\_\_\_  
Describe your work \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_  
Starting Pay \_\_\_\_\_  
Ending Pay \_\_\_\_\_  
Employment Dates:  
From: \_\_\_\_\_  
To: \_\_\_\_\_

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_  
Job Title \_\_\_\_\_  
Describe your work \_\_\_\_\_  
\_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_  
Starting Pay \_\_\_\_\_  
Ending Pay \_\_\_\_\_  
Employment Dates:  
From: \_\_\_\_\_  
To: \_\_\_\_\_

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

---

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 (308) 436-5600  
Fax: 308-436-6899, or email to [apalm@gering.org](mailto:apalm@gering.org)

NOTE: If submitted by email or fax, please understand that the original applications need to be mailed to the above address.