

City of Gering Job Applicant,

Please read and understand this statement before signing your job application.

**Job Applications must be completed in their entirety (“see resume” is not sufficient)** as this is the tool that will be used during the initial review in order to select applicants for interview. A resume may and should be completed and submitted with the job application.

The information provided in this job application must be true. False or misrepresented information will be sufficient cause for the application to be rejected (or cause for termination if discovered after employment).

You are authorizing the City of Gering to obtain information from previous employers, educational institutions and other parties to verify the accuracy of the information provided in this application. You are waiving all rights and claims you may have for seeking and using the information to evaluate the application.

This application will be used only for the position for which you are currently applying. If you wish to re-apply for another position, even if is the same classification, you must complete and submit a new application.

Thank you.

Human Resources



# 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? \_\_\_\_\_  
 No Yes If yes, date: \_\_\_\_\_ Date Available to Begin Work: \_\_\_\_\_

Position Desired: \_\_\_\_\_ Pay Expected: \_\_\_\_\_

Apart from absence for religious observance, what hours are you available?  
 Full-Time  Seasonal  Part-Time  Overtime (if requested)  
 Are you legally eligible for employment in the United States? Yes No

Have you ever been bonded?  No  Yes

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