

TOWN OF WICKENBURG

Application For Employment



We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

PLEASE PRINT OR TYPE

Positions Applied For	Date of Application	
How Did You Learn About Us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In <input type="checkbox"/> Website <input type="checkbox"/> Relative <input type="checkbox"/> Other _____		
Last Name	First Name	Middle Name
Address: Physical & Mailing		City State Zip Code
Telephone Number(s)	Email Address	

Are you prevented from lawfully becoming employed in this country (*Proof of citizenship or immigration status will be required upon employment*)? Yes No

Do you currently have any relatives employed by the Town? Yes No
 If Yes, give their relationship and name: _____

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

May we contact your present employer? Not employed Yes No

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

On what date would you be available for work? _____

Have you ever been convicted of a felony, misdemeanor or serious driving offense, regardless of whether the conviction was later set aside or expunged, in any domestic, foreign or military court (this does not include minor civil traffic offenses)? *Conviction will not necessarily disqualify an applicant from employment.* Yes No

If Yes, please explain _____

Are you pending charges, trial or other court proceedings for a felony, misdemeanor or serious driving offense in any jurisdiction at this time? Yes No

If Yes, Charge _____ Date _____ Jurisdiction _____

Have you ever been terminated or forced to resign? Yes No

If yes, please explain the circumstances: _____

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EDUCATION

	Name and City of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate School				
Graduate / Professional				
Other (Specify)				

Indicate any Foreign Languages (other than English) 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 US Military/ Reserves:

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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. Please do not write, see resume. If you need additional space, continue on a separate sheet of paper. Please include at least the past 10 years.

Employer		<u>Dates Employed</u> From To		Work Performed
Address, City, State				
Telephone Number(s)		<u>Salary</u> Starting Final		
Job Title	Supervisor			
Reason for Leaving				
Employer		<u>Dates Employed</u> From To		Work Performed
Address, City, State				
Telephone Number(s)		<u>Salary</u> Starting Final		
Job Title	Supervisor			
Reason for Leaving				
Employer		<u>Dates Employed</u> From To		Work Performed
Address, City, State				
Telephone Number(s)		<u>Salary</u> Starting Final		
Job Title	Supervisor			
Reason for Leaving				
Employer		<u>Dates Employed</u> From To		Work Performed
Address, City, State				
Telephone Number(s)		<u>Salary</u> Starting Final		
Job Title	Supervisor			
Reason for Leaving				

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ADDITIONAL INFORMATION

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.*

OTHER QUALIFICATIONS: Summarize special job-related skills and qualifications acquired from employment or other experience: _____

SPECIALIZED SKILLS: Check or List Software / Equipment Operated: Typing (wpm) _____

Word: Excel: Outlook: PowerPoint: Publisher: Caselle:

Equipment Operated: _____

Other Experience: _____

State any additional information you feel may be helpful to us in considering your application:

NOTE TO APPLICANTS: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. Are you capable of performing in a reasonable manner, the activities involved in the job or occupation for which you have applied? A job description of the activities involved in such a job or occupation is available. Yes No

PROFESSIONAL REFERENCES:

1.Name: _____ Phone No(s): _____

Address: _____

How do you know this person? _____

2.Name: _____ Phone No(s): _____

Address: _____

How do you know this person? _____

3.Name: _____ Phone No(s): _____

Address: _____

How do you know this person? _____

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APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed one year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Town of Wickenburg is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or 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 Town of Wickenburg.

Signature of Applicant

Date

FOR TOWN STAFF USE ONLY

Meets Minimum Qualifications:	Yes _____	No _____
Complete Application and didn't write see resume:	Yes _____	No _____
Schedule Interview?	Yes _____	No _____
Interview Scheduled for: Date _____	Time _____	
Top Applicant out of Interviews?	Yes _____	No _____
Reference Check Done: By Whom _____	Date _____	
Background Check Complete and Passed:	Yes _____	No _____
Drug Screen Complete and Passed:	Yes _____	No _____
Physical Complete and Passed:	Yes _____	No _____

Hired on: _____ Salary/Wage: _____

Job Title: _____

Notes: _____



If you need reasonable accommodations, please notify the Town within 48 hours of the scheduled meeting.

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