# Application For Employment

## **City of Somerset**

Attn: Human Resources 306 East Mt. Vernon Street Somerset, KY 42501 606-679-6366

We offer equal employment opportunities to all persons without regard to race, color, religion, age, marital or veterans status, sex, national origin, disability, or any other legally protected status.									
Position(s) Applied For			Date of Applica	tion					
How Did You Learn About Us?  Advertisement									
Last Name	Last Name First Name Middle Name								
Address Number Street City State Zip Code									
Telephone Number(s)	rity Number								
Email Address:									
If you are under 18 years of age, can you provide required proof of your eligibility to work?									
Have you ever filed an application with us before?  If Yes, give date  Yes \( \subseteq \text{No}, \)									
Have you ever been employed with us before? ☐ Yes ☐ No  If Yes, give date ☐ Yes ☐ No									
Are you currently employed?		, C	☐ Yes	□ No					
May we contact your present emp	loyer?		☐ Yes	□No					
Are you prevented from lawfully	becoming employed in	n this							
<b>country</b> Proof of citizenship or immigration status wild	l be required upon employment		☐ Yes	□No					
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" sta	tus and subject to rec	all?	☐ Yes	□ No					
Can you travel if a job requires it.?  ☐ Yes									
Have you been convicted of a felony?  Conviction will not necessarily disqualify an applicant from employment.  Yes N									
If Yes, please explain									

## Education

	Elementary School		High School				С	ollege	/Unive	ersity	Graduate / Professional						
School Name and Location																	
Years Completed	4	5	5 6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree			•					•					•				•
Describe Course of Study																	
Describe any specialized training, apprenticeship, skills and extra-curricular activities																	
Describe any honors you have received																	
State any additional information you feel may be helpful to us in considering your application																	
References  Give name, address and telephone number of three references who are not related to you and are not previous employers.																	
1.	Jus	CI	пріс	) y C1	ο.												
2.																	
3.																	
J.																	
Have you ever had any job-related training in the United States military?																	
Do you have a driver's license?																	
If so, show State																	
Office Applicants: Can you take																	
What office machines do you o	nera	te?															

# **Employment Experience**

Start with your present or last job. Include military *service* assignments and volunteer activities. Exclude volunteer activities which indicate race, age, religion, sex, national origin, ancestry, disability or *other* protected status.

(1) Employer	Telephone	Dates Er	nployed	W 1 D C 1
		From	To	Work Performed
Address				
Job Title		Hourly Ra	ate/Salary	
		Starting	Final	
Supervisor				
Reason for Leaving				
-				
(2) Employer	Telephone	Dates Er	nnloved	
( ) 1 - ) -	rolophono	From	То	Work Performed
Address,		Tiom	10	
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Job Title		Hourly Ra	oto/Colomi	
JOB TILLE			Final	
Supervisor		Starting	rillai	
Supervisor				
December Leaving				
Reason for Leaving				
(6) 5	T			
(3) Employer	Telephone	Dates Er		Work Performed
		From	To	WOIR Fellorined
Address				
Job Title		Hourly Ra		
		Starting	Final	
Supervisor				
Reason for Leaving				
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(4) Employer	Telephone		mployed	Work Performed
		From	То	Work I chronica
Address				
Job Title			ate/Salary	
		Starting	Final	
Supervisor				
Reason for Leaving	<u> </u>			

M	Iay we contact the	he employers	listed abov	? If not, indicate which one(s) you do not wish us to contact	

#### **AGREEMENT**

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

You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice. I understand that I have the right to make a written request within a reasonable period of time to receive detailed information about the nature and scope of any investigative report that is made.

I understand that I am making application only for the current vacancy and that I must reapply for any subsequent vacancies.

If I were to be offered employment or in my being considered for employment by the City of Somerset, I agree to conform to the rules and regulations of the City of Somerset and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by the City of Somerset at any time, at the City of Somerset's sole option and without any prior notice to me.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the City of Somerset and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the City of Somerset unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that the City of Somerset retains the same right.

Should I be offered employment I understand that I will be required to submit to a physical examination which may include a drug screen and that my employment will be conditional upon the results of said physical examination and drug screen.

In the event of employment, I understand that false or misleading information given in, my application or interview(s) may result in discharge.

SIGNATURE OF APPLICANT		DATE
Arrange Interview  Yes	□No	
_		
Remarks		
	·	INTERVIEWER DATE
Employed ☐ Yes ☐ No	Date of Employment	
F 17 1 100 1100	Hourly Rate/	
Job Title		artment
By		
Ву	NAME AND TITLE	DATE
JOTH G		
NOTES		

### ATTACHMENT II

## PRE-EMPLOYMENT TESTING NOTICE TO APPLICANTS FOR NON-SAFETY AND SAFETY SENSITIVE POSITIONS

YOUR APPLICATION WILL BE CONSIDERED INCOMPLETE IF THIS NOTICE IS NOT SIGNED AND DATED!

	ng that I will be given pre-employment of the last include the last includ	
Signed:		
Name	Date	