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, or any other legally protected status.

(PLEASE TYPE OR PRINT)

Position(s) Applied For:		Date of Applica	tion	
How Did You Learn About Us?				
Advertisement	Friend	Inquiry		
Employment Agency	Relative	Other		
Last Name	First Name		Middle Name	
Last Name	Thaine		Wildule Name	
Address Number	Street	City	State	Zip Code
Telephone Number(s)		Social Security Nur	mber (voluntary)	
Best time to contact you at home is:			:	AM/PM
If you are under 18 years of age, can you p proof of your eligibility to work?	rovide required		Yes	No
Have you ever filed an application with us If Yes, give date	before?		Yes	No
Have you ever been employed with us before If Yes, give date	ore?		Yes	No
Do any of your friends or relatives, other the If Yes, state name, relationship and location			Yes	No
Are you currently employed?			Yes	No
May we contact your present employer?			Yes	No
Are you prevented from lawfully becoming country because of Visa or Immigration St. Proof of citizenship or immigration	atus?	uired upon employ.	Yes ment.	No
Date available for work//	What is your des	ired salary range?		
Are you available to work: Full Time Part Time Temporary	(Please	indicate: 1 2 3 indicate: Morning indicate dates avail	gs Afternoons	
Are you currently on "lay-off" status and s	ubject to recall?		Yes	No
Can you travel if a job requires it?			Yes	No

Education

School	Name & Address of School	Course of Study	No. Of Years	Diploma /
			Completed	Degree
High School				
Undergraduate				
College				
Graduate /				
Professional				
Other				
(Specify)				

Work 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.

Present Employer		Employed From	То	Work Performed
Address		Employed From	10	WOIR I CHOIMED
Telephone Number(s)	Starting Salary/Rate	Final Salary/Rate	
Job Title	Supervisor	Starting Sarary/Rate	Filial Salary/Rate	
Reason for Leaving			May We Contact	YesNo
Employer		Employed From	То	Work Performed
Address		2mpioyed From	10	WOIR I CHOIMC
Telephone Number(s)	Starting Salary/Rate	Final Salary/Rate	
Job Title	Supervisor			
Reason for Leaving			May We Contact	YesNo
Employer		Employed From	То	Work Performed
Address		2.mprojec 110m		W 0311 1 011011110
Telephone Number(s)	Starting Salary/Rate	Final Salary/Rate	
Job Title	Supervisor	2 2 3		
Reason for Leaving			May We Contact	YesNo
Employer		Employed From	То	Work Performed
Address		,	· ·	
Telephone Number(s)	Starting Salary/Rate	Final Salary/Rate	
Job Title	Supervisor	g z many, return		
Reason for Leaving			May We Contact	YesNo
Comments: Include	e explanation of any ga	ns in employment		ı

Describe any specialized tra	ining, apprenticeship, skills	and extra-curricular activities.	
Describe any job-related train	ning received in the United	States military.	
List professional, trade, busi You may exclude membership whic		offices held. ional origin, age, ancestry, disability,	or other protected status:
ADDITIONAL INFORMATOTHER Qualifications		and qualifications acquired from emp	oloyment or other experience.
SPECIALIZED SKILLS (Sk Terminal PC/MAC Typewriter WPM State any additional informa	Spreadsheet Word Processin Shorthand WPM		Other (list)
ABOUT THE REQUIRE Are you capable of perform	MENTS OF THE JOB FOR rming in a reasonable manne job or occupation for which has been given.	STION UNLESS YOU HAVE WHICH YOU ARE APPLY er, with or without a reasonabl you have applied? A review of	e accommodation, the of the activities involved in YESNO
		nembers or past supervisors.	•
Name	Phone Number	Best Time to Call	Occupation
1.			
2.			

3.

Applicant's Statement

I certify that answers given herein are true and complete.

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 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether of 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 City of Ashland is of an "at will" nature, which means that the Employee may resign at any time and the City of Ashland may discharge the 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 the Mayor and Council.

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 employer.

Signature of Applicant	Date	