

APPLICATION FOR EMPLOYMENT

The City of Marion is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex, religion, disability, national origin, or any other protected class.

APPLICANT INFORMATION										
Last Name		First		M.I.		Date				
Street Address						Apartment/Unit #				
City				State			ZIP			
Phone (s)		E-mail Address								
Date Available				Last four digits of SSN		XXX – XX–		Desired Salary \$		
Position Applied for										
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for The City of Marion?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?						
Are you employed now?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, may we contact your employer?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Type of Employment Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Summer <input type="checkbox"/> Temporary <input type="checkbox"/>										
Do you have reliable transportation to/from work?						YES <input type="checkbox"/>	NO <input type="checkbox"/>			
If the position requires it, are you able to show proof of a valid drivers' license?						YES <input type="checkbox"/>	NO <input type="checkbox"/>			
EDUCATION AND OFFICE SKILLS										
High School					Address					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>				
College or Trade School					Address					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Years of Typing Experience				Words Per Minute			Other Office Equipment Used Printer <input type="checkbox"/> Copier <input type="checkbox"/> Fax <input type="checkbox"/> Scanner <input type="checkbox"/> Calculator <input type="checkbox"/>			
Computer Software and Hardware Experience										
EMPLOYMENT HISTORY (LIST PRESENT OR MOST RECENT POSITIONS FIRST)										
Company					Phone					
Address					Name and Position of Supervisor					
Job Title										
Responsibilities										

From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
EMPLOYMENT HISTORY (CONTINUED)							
Company				Phone			
Address				Name and Position of Supervisor			
Job Title							
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company				Phone			
Address				Name and Position of Supervisor			
Job Title							
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company				Phone			
Address				Name and Position of Supervisor			
Job Title							
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
MILITARY SERVICE							
Branch				From		To	
Rank at Discharge				Type of Discharge			
If other than honorable, explain							
DISCLAIMER AND SIGNATURE							
I certify that my answers are true and complete to the best of my knowledge.							
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.							
I further acknowledge that an offer of employment does not constitute an employment contract and all employment is on an At-will basis as							

governed by the laws in the State of Arkansas.

If offered employment, the City of Marion has my consent to run a background check and/or drug screen as applicable to the position for which I am hired. I understand that my employment may be contingent upon successful completion of the required conditions of employment.

I authorize all former employers and references to freely and fully disclose information pertaining to my work history and character.

Signature		Date	
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