

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, religion, disability or national origin. Consistent with the Americans with Disabilities Act, applicants may request accommodations needed to participate in the application process.

PERSONAL INFORMATION

Date:

Social Security Number:

Name:

Last

First

Middle

Present Address:

Street

City

State

Zip

Permanent Address:

Street

City

State

Zip

Phone No.

Referred

By:

Are you 18 years of age or older?

Yes

No

Circle correct response

EMPLOYMENT DESIRED

Position

Date You
Can Start

Salary
Desired

Are you Employed Now?

Yes No

If So May We Inquire
of Your Present Employer?

Yes No

Circle One

Circle One

Ever Applied to this Company Before?

Yes No

Where?

When:

Circle One

EDUCATION

Name & Location of School

Circle
Last Year
Completed

Did You
Graduate

Subjects Studied and
Degree(s) Studied

Grammar School

Yes
No

High School

1 2 3 4

Yes
No

College

1 2 3 4

Trade, Business or
Correspondence
School

1 2 3 4

GENERAL

Subjects of Special Study or Research Work:

Job Related Skills (typing, driver's licenses, etc.)

(Continued on Other Side)

FORMER EMPLOYERS: List below your last four employers, starting with the last one first.

Date Month and Year	Name and Address of Employer	Salary (Upon leaving)	Position	Reason for Leaving
From _____				
To				
From _____				
To				
From _____				
To				

REFERENCES: List below three persons not related to you, whom you have known at least one year.

Name	Address	Position	Years Acquainted
1			
2			
3			

Date: _____ **Signature:** _____

“The following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking employment with the Village of Angelica. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.”

Ethnicity: Hispanic or Latino Not Hispanic or Latino

Race: (Mark one or more) White Black or African American American Indian/Alaska Native

Asian Native Hawaiian or Other Pacific Islander

Gender: Male Female

AUTHORIZATION:

I authorize investigation on all statement contained in this application. I understand that misrepresentation of information requested is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without case and without any previous notice.

Date: _____ **Signature:** _____

DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY

Interviewed by: _____ Date: _____

REMARKS: _____
