

## City of Edgewood Employment Application Form

DATE _____				
Name _____				
Last	First	Middle		
Present address _____				
Street Address			City	State
				Zip
Telephone (____) _____				
Are you under age 18 ___ YES ___ NO, If "YES", can you provide proof of your eligibility to work? ___ YES ___ NO Are you currently authorized to work In the United States? ___YES ___No				
Position applied for (1) _____ and wage desired (2) _____				
Employment desired <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> TEMPORARY/CONTRACT				
When are you available to start work? _____				
<b>EDUCATION</b>				
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR&DEGREE
High School				
College				
Bus. or Trade School				
Professional School				
Experience/Skills related to the position for which you are applying:				
Were you referred by a current employee? If so, whom? _____				

## APPLICATION FOR EMPLOYMENT

<b>Work Experience</b>	Please list your work experience beginning with your most recent job held: If you were self-employed, give firm name. <b>Attach additional sheets if necessary.</b>
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Name of employer:  Address: City, State, Zip Code:  Phone number:	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
	Your last job title		
Reason for leaving (be specific)			
Name of employer:  Address: City, State, Zip Code:  Phone number:	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
	Your Last Job Title		
Reason for leaving (be specific)			
Name of employer:  Address: City, State, Zip Code:  Phone number:	Name of last supervisor	Employment dates	Pay or. salary
		From	Start
		To	Final
	Your last job title		
Reason for leaving (be specific)}			
Name of employer:  Address: City, State, Zip Code:  Phone number:	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
	Your last job title		
Reason for leaving (be specific)			

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**PLEASE READ CAREFULLY**

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I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other person or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

We are an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age, height, weight, or disability. We assure you that your opportunity for employment with us depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

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Applicant Signature

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Print

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Date