CITY OF MORNING SUN APPLICATION FOR EMPLOYMENT

(Print neatly and complete all blanks)

| PERSUNAL | | | | | | | | | |
|--|---|---|-------------------------|--|--|--|--|--|--|
| Full Name: | | | | | | | | | |
| First | Middle Initial | Last | | | | | | | |
| Current Address: | | | | | | | | | |
| Number | Street City | | State Zip | | | | | | |
| Telephone Number: () | one Number: () Social Security Number: | | | | | | | | |
| Are you 18 years of age or older? Are you legally able to work in the United States? | □ □ If Y | you a military Veteran es, Dates of ive Duty: | ? Yes | | | | | | |
| Have you ever been known by any on this application? | other name(s) that this compa | any will require to verify | any of the information | | | | | | |
| EMPLOYMENT DESIRED | | | | | | | | | |
| Job Title: | b Title: | | | | | | | | |
| Are you available for work: Full-Ti | me Part-Time | Temp Seaso | onal 🗌 | | | | | | |
| EDUCATION | | | | | | | | | |
| Do you have a High School Diploma or GED? Yes No | | | | | | | | | |
| Name of last school attended: | | City: | State: | | | | | | |
| Circle last year of school complet | red: 6 7 8 9 10 11 1 | 12 13 14 15 16 1 | 7 18 | | | | | | |
| Circle the highest degree earned: High School Diploma GED Certificate AA BD MD PHD Other | | | | | | | | | |
| Area of Concentration and/or deg | ree(s), certificates, licenses | s, endorsements: | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Other Training or Skills (Factory o | or Office Machines Operate | d, Special Courses, C | computer Skills, etc.): | | | | | | |
| Other Training or Skills (Factory o | or Office Machines Operate | d, Special Courses, C | omputer Skills, etc.): | | | | | | |

| EMPLOYMENT HIST | ORY | | | | | | |
|--|------------------------------------|------------------------|-----------|---------|-------------|--------------------------|-------------|
| Former Employmen | t (List employers, s | tarting with the curre | nt or mo | st rece | nt. Explain | all gaps in time of empl | loyment.) |
| Company Name: | | | | Job | Title: | | |
| Address: | | | | | | | |
| Number | Street | | City | | | State | Zip |
| Start Date: | 1 1 | End Date: | | 1 | 1 | Rate of Pay: | |
| Detailed Job Duties: | | | | | | | |
| Reason for Leaving: | | | | | | | |
| Company Name: | | | | Job | Title: | | |
| Address: | | | | | | | |
| Number | Street | | City | | | State | Zip |
| Start Date: | 1 1 | End Date: | | 1 | 1 | Rate of Pay: | |
| Detailed Job Duties: | | | | | | | |
| Reason for Leaving: | | | | | | | |
| Company Name: | | | | Job | Title: | | |
| Address: | | | | | | | |
| Number | Street | | City | | | State | Zip |
| Start Date: | 1 1 | End Date: | | 1 | 1 | Rate of Pay: | |
| Detailed Job Duties: | | | | | | | |
| Reason for Leaving: | | | | | | | |
| May we contact your former employers to verify this information? Yes No | | | | | | | |
| | . , | | | | | • | |
| Please provide any add this position: | ditional information | on about your abili | ties or i | nterest | s that ma | kes you a good car | ndidate for |
| | | | | | | | |
| I authorize investigati | on of all statem | ents contained in | n the ap | oplicat | tion. I und | derstand that omis | ssion or |
| misrepresentation of | | | • | - | | | |
| Signature: | | | | | | Date: | |