



# City of Huntington

## EMPLOYMENT APPLICATION

The City of Huntington, Indiana, does not discriminate on the basis of race, gender, national origin, religion, or any other classification protected under applicable law in employment or the provision of services.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
City State Zip Code

Phone Number: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Are you applying for: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

If your application is considered favorably, on what date would you be available for work? \_\_\_\_\_

Have you been employed here before? \_\_\_\_\_ When: \_\_\_\_\_

If under the age of 18, can you provide required proof of eligibility to work? \_\_\_\_\_

Presently Employed? \_\_\_\_\_ Can we contact your current employer? \_\_\_\_\_

Have you been convicted of a felony in the last seven years? \_\_\_\_\_ Yes \_\_\_\_\_ No  
(such conviction may be relevant if job-related, but does not automatically bar you from employment)

### EDUCATION

	Junior High	High School	College	Grad/Professional
School Name				
Years Completed				

High School Diploma? \_\_\_\_\_ G.E.D.? \_\_\_\_\_

College Degree? \_\_\_\_\_

Describe any specialized training, apprenticeship, special skills, other language, extra curricular activities or honors received. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## REFERENCES

Give name, address and phone number for three (3) business or professional references who are not related to you. \_\_\_\_\_

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## EMPLOYMENT EXPERIENCE

Make the top box your present or most recent job. Include any job-related or military service assignments. Continue on the other side if necessary.

<i>Employer</i>	<i>Date of Employment</i>	<i>Work Performed</i>
Address		
Phone		
Job Title		
Reason for leaving		

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Address		
Phone		
Job Title		
Reason for leaving		

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Address		
Phone		
Job Title		
Reason for leaving		

**SPECIAL QUALIFICATIONS**

Summarize any special qualifications acquired through employment, military service, volunteer work or other experience. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a valid drivers license?\_\_\_\_\_

Check the type of license you possess.      Operator      Chauffeur      CDL (A or B)

If required, can you obtain a CDL license? \_\_\_\_\_

Do you have relatives working for us? \_\_\_\_\_

Department? \_\_\_\_\_ Relationship? \_\_\_\_\_

**APPLICANT’S STATEMENT**

I understand that the City follows an “employment at will” policy, in that I or the City may terminate my employment at any time for any or no reason; this “employment at will” policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the City Board of Public Works and Safety. I understand that this application is not a contract of employment.

I understand that this application will be active for a period of 60 days; after that time, if I wish to be considered for employment, I must submit a new application.

I understand that the City may thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and companies named therein, except my current employer if so noted; to provide any information requested about me, and I release them from all liability for damage in providing this information.

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_