

# City of Huxley Application for Employment



(PLEASE PRINT)

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, sexual orientation, gender identity, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

Date of Application: \_\_\_\_\_

## Position(s) Applying For:

Referral Source:

Advertisement  Friend  Relative  Employment Agency  Other

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number Street City State Zip Code

Phone Number (\_\_\_\_) \_\_\_\_\_ Cell Phone Number: (\_\_\_\_) \_\_\_\_\_  
area code area code

Email Address: \_\_\_\_\_

Have you filed an application here before?  Yes  No Date \_\_\_\_\_

Have you ever been employed here before?  Yes  No Date \_\_\_\_\_

Are you currently employed?  Yes  No

Are you a citizen of the United States?  Yes  No If not, do you possess an Alien Registration Card?  Yes  No

If not, do you possess an Alien Registration Card?  Yes  No If yes, give Registration Number \_\_\_\_\_

Are you available to work?  Full Time  Part Time  Temporary  Regular

Are you on lay-off and subject to recall?  Yes  No

Can you travel if a job requires it?  Yes  No

Do any of your friends or relatives, other than your spouse, work for the City of Huxley?  Yes  No

If yes, list names(s) \_\_\_\_\_

Have you been convicted of a misdemeanor or felony within the last 7 years?  Yes  No

\*A conviction will not automatically disqualify an applicant for a particular job. The type and seriousness of the crime, the frequency of violations, the date of conviction, and the applicant's entire work history and education history will be considered.

If yes, please explain \_\_\_\_\_

If required for the position, do you have a valid driver's license or CDL?  Yes  No

Driver's License # \_\_\_\_\_

**AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER M/F/V/H**

***City of Huxley***  
***Employment Experience***

List each job held. Start with your Present or Last job. Include military service assignments and volunteer activities. (Example groups which indicate race, color, religion, sex or national origins.)

<b><i>Employer</i></b>	Dates		Work Performed
	From	To	
Address			
Job Title	Hrly. Rate/Salary		
	Start	Final	
Supervisor			
Reason for Leaving			
<b><i>Employer</i></b>	Dates		Work Performed
	From	To	
Address			
Job Title	Hrly. Rate/Salary		
	Start	Final	
Supervisor			
Reason for Leaving			
<b><i>Employer</i></b>	Dates		Work Performed
	From	To	
Address			
Job Title	Hrly. Rate/Salary		
	Start	Final	
Supervisor			
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

Give name, address and phone number of three references not related to you.

1. \_\_\_\_\_  
 \_\_\_\_\_
2. \_\_\_\_\_  
 \_\_\_\_\_
3. \_\_\_\_\_  
 \_\_\_\_\_



# City of Huxley



## Military

Are you a veteran of the U.S. military service?  Yes  No

If yes, what was your Branch of U.S. military service? \_\_\_\_\_

## Education

	Elementary	High School	College/University	Graduate/Professional
School Name				
Years Completed: (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities.				

Honors Received: \_\_\_\_\_

*Summarize your experience.* List specific duties and responsibilities that would relate to the position that you are applying for.

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# City of Huxley---Applicant's Statement

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I certify that answers and information given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

I understand that if I apply for employment with this City, the City may conduct a check of my criminal history, past employment history, medical history, scholastic record, motor vehicle driving records, workers' compensation history and to receive the results of any physical examination, including the results of alcohol and/or drug screening I may be required to undergo, and to rely on such information.

In the event of employment, I understand that false, incomplete or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

I hereby acknowledge that the selection process for this position is subject to Iowa open meetings and records. I request that the sessions in which my qualifications are reviewed and discussed be done in closed session so as to protect my reputation.

\_\_\_\_\_  
Signature of Applicant

**\*If you do not sign this acknowledgement/request, your application may become a public record and consideration of your application may be done in open session.**

