# CITY OF IRETON APPLICATION FOR EMPLOYMENT

**The City of Ireton is an Equal Opportunity Employer**

The law prohibits discrimination in hiring due to age, race, color, creed, sex, national origin, religion, disability, or veteran's status.

(Print neatly and complete all blanks)

## PERSONAL INFORMATION:

Full Name: _____
First Middle Initial Last

Current Address: _____
Number Street City State Zip

Telephone Number: _____ Social Security Number: _____

Are you 18 years of age or older? Yes ☐ or No ☐

Are you legally able to work in the United States? Yes ☐ or No ☐

Are you a military Veteran as defined in Iowa Code Section 35.1? Yes ☐ or No ☐

If yes, provide dates of active duty: _____ to _____

Have you ever been known by any other name(s) that this company will require to verify any of the information on this application? Yes ☐ or No ☐

If yes, provide all other name(s): _____

## POSITION DESIRED:

Job Title: _____ Date you can start: _____ Wage Desired: _____

Are you available for work: Full-Time ☐ Part-Time ☐ Shift Work ☐ Seasonal ☐

## EDUCATION:

Do you have a High School Diploma or GED? Yes ☐ or No ☐

Name of the last school attended: _____ City: _____ State: ____

Circle Last year of school completed: 6 7 8 9 10 1 12 13 14 15 16 17 18

Circle the highest degree earned: High School Diploma GED Certificate AA BD MD PHD Other

Area of Concentration and/or degree(s), certificates, licenses, endorsements: _____

_____

_____

Other Training or Skills (factory or office machines operated, special courses, computer skills, etc):

_____

_____

_____

_____

## EMPLOYMENT HISTORY:

Former Employment (List employers, starting with the current or most recent. Explain all gaps in time of employment.)

Company Name: _____ Job Title: _____

Address: _____
Number Street City State Zip

Start Date: _____ End Date: _____ Rate of Pay: _____

Detailed Job Duties: _____

_____

_____

Reason for Leaving: _____

_____

Company Name: _____ Job Title: _____

Address: _____
Number Street City State Zip

Start Date: _____ End Date: _____ Rate of Pay: _____

Detailed Job Duties: _____

_____

_____

Reason for Leaving: _____

_____

Company Name: _____ Job Title: _____

Address: _____
Number Street City State Zip

Start Date: _____ End Date: _____ Rate of Pay: _____

Detailed Job Duties: _____

_____

_____

Reason for Leaving: _____

_____

May we contact your former employers to verify this information? Yes ☐ or No ☐

May we contact your present employer? Yes ☐ or No ☐

_____

Please provide any additional information about your abilities or interests that makes you a good candidate for this position: _____

_____

_____

_____

Please List 3 References that are not related to you, and whom you have known for at least one year.

1._____

2._____

3._____

**I authorize investigation of all statements contained in the application. I understand that omission or misrepresentation of facts is cause for dismissal.**

**Signature:** _____ **Date:** _____