

APPLICATION FOR EMPLOYMENT

City of Clear Lake
125 Third Avenue South
P.O. Box 107
Clear Lake, SD 57226-0107

Answer all questions – please print!!

In Compliance with Federal and State employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a disability or handicap.

Date of Application: _____

Position(s) Applying For: _____

Referral Source: Advertisement Friend Relative Employment Agency

Other _____

Name: _____

Last

First

Middle

Present Address: _____

Street

City

State

Zip

Phone No.: _____ Cell Phone No.: _____

Have you filed an application or been employed here before? Yes No

I certify that I am a U.S. citizen, permanent resident, or a foreign national with authorization to work in the United States Yes No

Would you work: Full-time Part-time
Specify days/hours if part-time _____

If your job requires you to travel, do you have a valid driver's license? Yes No

Give the name, address, and phone number of three (3) references not related to you or a former employee.

1. _____

2. _____

3. _____

EMPLOYMENT EXPERIENCE

List each job held. Start with your present or last job. Include military service assignments and volunteer activities

Employer	Dates		Work Performed
	From	To	
Address			
Job Title	Hourly Rate or Salary		
	Starting	Final	
Reason for Leaving			

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

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with our organization? If so, please explain: _____

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:				

AGREEMENT

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

I authorize you to make such investigations and inquiries of my personal, employment, financial, or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connections with my application.

In the event of employment, I understand that false and 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 Company.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No Date _____

Remarks _____

Employed: Yes No Date of Employment _____

Job Title _____ Hourly Rate/Salary _____ Department _____