

APPLICATION FOR EMPLOYMENT



City of Erlanger

505 Commonwealth Avenue
Erlanger, Kentucky 41018-0818
(859) 727-2525

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

Position Applied For _____

Salary Desired _____ Minimum Acceptable Salary _____

How did you hear of us? _____ (Radio, TV, Newspaper, or Other)

Full Name _____

Address _____

Number Street City County State Postal

Telephone (____) ____ - _____ Social Security Number ____ - ____ - _____

Other Phone (____) ____ - _____ email address: _____

Are you at least 18 years old? [] Yes [] No

Have you filed an application with City of Erlanger before? [] Yes Date(s) _____ [] No

Have you ever been employed by City of Erlanger previously? [] Yes [] No

If yes, please provide the following:

Date(s) employed _____ Department _____

Are you currently employed? [] Yes [] No May we contact your employer? [] Yes [] No

Does your citizenship or immigration status lawfully allow you to be employed in this country? (Proof of citizenship or immigration status will be required upon employment.) [] Yes [] No

On what date would you be available for work? _____

Time Basis You Would Accept - [] Full-time [] Part-time [] Temporary

Shifts You Would Accept - [] Days [] Nights [] Evenings [] Weekends [] On Call

EMPLOYMENT HISTORY

Starting with the most recent position, list below the names of ALL former employer(s) for the last 15 years. If you had more than one position with the same employer, list each separately. Include military service assignments and volunteer activities. Exclude statements, which indicate race, color, religion, sex, national origin, or disability.

Are you attaching a copy of your resume as part of your application? Yes No

Employer:	Brief Description of Job Responsibilities:
Address:	
Phone:	
Supervisor:	
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
Job Title:	
Dates Employed:	
Reason for Leaving:	

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Address:	
Phone:	
Supervisor:	
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
Job Title:	
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Job Title:	
Dates Employed:	
Reason for Leaving:	

QUALIFICATIONS AND SKILLS

Type of License, Registration Number or Certification	State or Licensing Authority	Expiration Date

What machines and/or equipment can you operate? _____

Computer equipment, software or word processing packages used?

Do you have a valid driver's license? No Yes Expiration date: _____ # _____

Do you have a reliable method of getting to work? Yes No

EDUCATION AND TRAINING

Schools	Name & Address of Institution	Number of Years Attended	Type of Courses Major/Minor	Degree Obtained
High School/ G.E.D.				
College/ University				
Technical School				
Trade, Business, Night or Correspondence School				

List any additional qualifications or experience you feel may be helpful to us in considering your application.

REFERENCES

Name	Home/Email Address	Phone Number	Company

(Criminal Records Verifications are conducted – should you be unsure visit your local police department and request a copy of your records.)

Have you ever been convicted of a felony? Yes No

If yes, please explain giving dates, location(s), and complete name at the time.

For employees related by blood or marriage to work at the City of Erlanger in the same department or division, we require specific approval of the Mayor as appropriate. In addition, in most cases where we employ you and a person related to you by blood or marriage, neither of you can have supervisory or line authority over the other.

Do you have any relatives employed by the City of Erlanger? Yes No

If yes, provide the following:

Name _____ Relationship _____
Department Employed by _____ Job Title _____

AGREEMENT

I CERTIFY THAT ALL ANSWERS TO THE QUESTIONS IN THIS APPLICATION ARE TRUE, AND I FURTHER UNDERSTAND THAT ANY FALSE STATEMENTS AND/OR OMISSION IN THIS APPLICATION WILL BE SUFFICIENT GROUNDS FOR REJECTION OF THE APPLICATION, OR TERMINATION OF EMPLOYMENT WITHOUT NOTICE.

I AUTHORIZE THE CITY OF ERLANGER TO MAKE ALL NECESSARY AND APPROPRIATE INVESTIGATIONS TO VERIFY THE INFORMATION CONTAINED HEREIN, INCLUDING CRIMINAL RECORDS, EDUCATIONAL CREDENTIALS AND WORK EXPERIENCE CHECKS. REFERENCES OBTAINED ARE DONE SO IN CONFIDENCE AND I UNDERSTAND THAT MY RIGHTS TO REVIEW ANY REFERENCE MATERIAL IS WAIVED.

I ALSO UNDERSTAND THAT IN SOME CIRCUMSTANCES, I WILL BE REQUIRED TO ENROLL AND PARTICIPATE IN AN APPROPRIATE KENTUCKY RETIREMENT PLAN IMMEDIATELY FROM POINT OF EMPLOYMENT IN A REGULAR STATUS POSITION – FAILURE TO DO SO SHALL RESULT IN TERMINATION OF EMPLOYMENT.

PRIOR TO EMPLOYMENT, I MUST PROVIDE INFORMATION RELATED TO IDENTITY AND EMPLOYABILITY. FAILURE TO PROVIDE APPROPRIATE DOCUMENTATION FOR VERIFICATION OF EMPLOYMENT ELIGIBILITY SHALL RESULT IN IMMEDIATE TERMINATION OF EMPLOYMENT AND/OR ANY OFFER OF EMPLOYMENT.

I UNDERSTAND THAT CITY OF ERLANGER POLICY PROVIDES ALL NEWLY HIRED EMPLOYEES WITH A SIX-MONTH INTRODUCTORY PERIOD (NOT INCLUDING TIME OFF WORK) THAT GIVES THE EMPLOYEE AND EMPLOYER AN OPPORTUNITY TO MUTUALLY DECIDE WHETHER OR NOT THE FUNCTIONS AND RESPONSIBILITIES OF THE NEW POSITION ARE A SATISFACTORY FIT WITH THE TALENTS AND SKILLS THE NEW EMPLOYEE BRINGS TO KCTCS. I FURTHER UNDERSTAND AND AGREE THAT DURING THIS INITIAL SIX-MONTH PERIOD I MAY DECIDE TO TERMINATE THE EMPLOYMENT RELATIONSHIP WITH NO CAUSE OR EXPLANATION REQUIRED, AND I UNDERSTAND THAT CITY OF ERLANGER HAS THAT SAME RIGHT. ONCE I HAVE SUCCESSFULLY COMPLETED THE INTRODUCTORY PERIOD, I SHALL BE CONSIDERED BY THE CITY OF ERLANGER TO HAVE EARNED CONTINUED EMPLOYMENT STATUS.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE.