

Application for Employment

City of Columbus

Human Resources Office

Mail Application to

P. O. Box 1408

Physical Address

523 Main Street

Columbus, Mississippi 39703-1408

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for _____ Date of Application _____

Name _____

LAST

FIRST

MIDDLE

Address _____

STREET

CITY

STATE

ZIP CODE

Telephone # () _____ Cell or other Phone # () _____ Social Security # _____

If you are under 18, and it is required, can you furnish a work permit?..... Yes No

If no, please explain _____

Have you ever been employed here before? Yes No

Are you legally eligible for employment in this country? Yes No

Date available for work _____

Type of employment desired Full-Time Part-Time Temporary Seasonal Educational Co-Op

Are you able to meet the attendance requirements of the position?..... Yes No

Have you ever pleaded "guilty", "no contest", "nolo contendere" to, or been convicted of a crime? Yes No

If yes, please explain on the attached sheet of paper provided.

Conviction will NOT necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.

Driver's License Number _____ State _____ (If driving is an essential job function)

Employment History *(Feel free to add additional employment info. on a separate sheet of paper)*

Provide the following information for your past three (3) employers, assignments or volunteer activities, starting with the most recent.

| FROM | TO | EMPLOYER | TELEPHONE () |
|--------------------------------|----|---|------------------|
| JOB TITLE | | ADDRESS | |
| IMMEDIATE SUPERVISOR AND TITLE | | SUMMARIZE THE NATURE OF WORK PERFORMANCE AND JOB RESPONSIBILITIES | |
| REASON FOR LEAVING | | HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____ | |
| FROM | TO | EMPLOYER | TELEPHONE () |
| JOB TITLE | | ADDRESS | |
| IMMEDIATE SUPERVISOR AND TITLE | | SUMMARIZE THE NATURE OF WORK PERFORMANCE AND JOB RESPONSIBILITIES | |
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| REASON FOR LEAVING | | HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____ | |

Skills and Qualifications

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying: _____

Educational Background (IF JOB RELATED)

| NAME AND LOCATION | YEARS COMPLETED | DID YOU GRAGUATE? IF YES, LIST THE YEAR | | COURSE OF STUDY |
|-------------------|-----------------|--|--------|-----------------|
| HIGH SCHOOL | | | | |
| COLLEGE | | MAJOR | DEGREE | |
| OTHER | | | | |

References

| NAME | TELEPHONE | YEARS KNOWN |
|------|-----------|-------------|
| | () | |
| | () | |
| | () | |

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations, or organizations for furnishing such information.

Please be advised that the City of Columbus adopted a Nepotism Policy which prohibits the following: **the employment of relatives that fall within the third degree of kinship to an elected official.** For the purposes of this policy, a relative is defined as any person who is related by blood or marriage within the third degree of kinship, as computed by the Rule of Civil Law. This includes persons who are related by **adoption, marriage** and by **half-blood**; it also includes stepbrothers, stepsisters, stepmother and stepfather. Further, the third degree of kinship includes: **mother, father, sister, brother, grandparent, great-grandparent, grandchild, great grandchild, aunt, uncle, niece and nephew.**

This employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

This application will remain active and on file for a period of one (1) year. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to complete a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA. I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date _____

NOTICE TO APPLICANTS

Screening tests for illegal drug use are required as a condition of employment

Signature of Applicant _____ Date _____

AN EQUAL OPPORTUNITY EMPLOYER

EXPLANATION SHEET

If you answered "YES" to the question on the front of the application regarding pleading "guilty", "no contest", "nolo contendere" to, or been convicted of a crime, please explain in the

space below. "Nolo Contendere" is a legal term that comes from the Latin for "I do not wish to contend." It is also referred to as a plea of **no contest**. **If you answered "NO" on the front of the application to this question, please write n/a by "APPLICANT'S NAME" and sign at the bottom.**

APPLICANT'S NAME _____

DATE OF CONVICTION: _____

IN YOUR EXPLANATION, YOU MAY, BUT ARE NOT REQUIRED TO, DISCUSS THE FOLLOWING FACTORS:

- *That the criminal record found by the employer was not actually that of the applicant and that he/she was incorrectly identified;*
- *The facts or circumstances surrounding the offense or conduct;*
- *The number of offenses for which you were convicted;*
- *Your age at the time of conviction or your release from prison;*
- *Any evidence that you performed the same type of work post-conviction or release from confinement;*
- *The length and consistency of employment history before and after the offense or conduct;*
- *Your rehabilitation efforts, e.g. education/training;*
- *Employment or character references and any other information regarding fitness for the position sought by you; and*
- *Whether you are bonded under a federal, state or local bonding program.*

SIGNATURE DATE