

CITY OF CHILlicothe



EMPLOYMENT APPLICATION

The City of Chillicothe provides equal employment opportunities to all people regardless of age, race, color, religion, ancestry, national origin, or disability. A high school diploma or equivalent is required for employment with the City of Chillicothe.

PLEASE PRINT

POSITION APPLYING FOR: _____

PERSONAL INFORMATION

NAME: _____

(Last)

(First)

(Middle Initial)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

SOCIAL SECURITY NUMBER: _____

Are you currently employed by the City of Chillicothe? Yes _____ No _____

Are you available to work any day of the week and at unusual hours? Yes _____ No _____

Are you a U.S. citizen or legally authorized to work in the U.S.? Yes _____ No _____

(Verification must be provided which establishes both identity and work authorization)

Do you wish to receive veteran's credit? Yes _____ No _____

(Please note: A copy of your DD214 showing discharge as "Honorable or Under Honorable Conditions" must be attached to your application for you to receive credit.)

EMPLOYMENT HISTORY

Current/Most Recent Employer: _____ Position _____

Address: _____

Phone Number: _____ Supervisor: _____

Dates of Employment: _____ Reason for Leaving: _____

Duties: _____

Next Previous Employer: _____ Position _____

Address: _____

Phone Number: _____ Supervisor: _____

Dates of Employment: _____ Reason for Leaving: _____

Duties: _____

Next Previous Employer: _____ Position _____

Address: _____

Phone Number: _____ Supervisor: _____

Dates of Employment: _____ Reason for Leaving: _____

Duties: _____

Next Previous Employer: _____ Position: _____

Address: _____

Phone Number: _____ Supervisor: _____

Dates of Employment _____ Reason for Leaving: _____

Duties: _____

ADDITIONAL QUESTIONS

If you are currently employed, may we contact your employer at this time? Yes _____ No _____

PLEASE NOTE: The City of Chillicothe reserves the right to contact the current employer if an offer is made.

EDUCATION

High School

Name: _____ Diploma, GED or Degree: _____

Location (City, State): _____

Did you graduate? Yes _____ No _____

College or University

Name: _____ Degree: _____

Location (City, State): _____

Did you graduate? Yes _____ No _____

Vocational or Business

Name: _____ Diploma or Degree: _____

Location (City, State): _____

Did you graduate? Yes _____ No _____

LICENSE INFORMATION

Driver's License #: _____ Class: _____

State: _____ Expiration Date: _____

CDL? Yes _____ No _____ CDL Permit? Yes ___ No ___

REFERENCES

Please list 3 references who are not related to you

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

APPLICANT

As a condition of employment, do you consent to taking a drug test if an offer is made and at offer times during employment? Yes _____ No _____

Do you fully understand that for up to 90 days of your employment, beginning with the first date you perform your job responsibilities, you will be on probation, which means that your continued employment will be at the discretion of the City of Chillicothe? Yes _____ No _____

Do you authorize the City of Chillicothe to make any investigation it considers necessary in regard to your application? Yes _____ No _____

I certify that the information contained in this application and all supporting documents are correct, to the best of my knowledge, and understand that falsification of employment records is grounds for dismissal regardless of the date such falsification is discovered.

Applicants Printed Name: _____

Applicant's Signature: _____ Date _____

Workforce Diversity Information

The City of Chillicothe is dedicated to equal opportunities in employment without regard to race, religion, gender, sexual orientation, national origin, age, veteran or disabled status or any other protected class.

The City of Chillicothe requests that you supply the following information in order to assist our efforts in ensuring we are providing equal employment opportunities to all people. Providing this information is **VOLUNTARY** and will in no way affect the processing of your application or your being considered for employment. If you choose to fill out this form, please submit it with your application. Thank you.

The following information is **VOLUNTARY** and will be kept confidential insofar as is possible.

Please complete the following entries:

_____ I choose not to provide race and/or gender information at this time.

OR

Sex: Male _____ Female _____

Ethnicity:

_____ **Hispanic or Latino** -- Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin

_____ **American Indian or Alaska Native** -- A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment

_____ **Black or African American** -- A person having origins in any of the black racial groups of Africa

_____ **Asian** -- A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including for example; Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

_____ **White** -- A person having origins in any of the original peoples of Europe, the Middle East, or North Africa

_____ **Native Hawaiian or Other Pacific Islander** -- A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands