

Please list your work experience beginning with your most recent employment (military experience may be included.)
 Include up to ten years of past employment.



City of Macedonia Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: _____ Email _____

Cell Phone: _____ Driver's License No. _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you available days? YES NO If yes, what days & times? _____

Are you available evenings & weekends YES NO If yes, what days & times? _____

Are you a citizen of the United States or otherwise authorized to work in the U.S. without restriction? YES NO

Have you ever worked for the City? YES NO If yes, when? _____

Education

	Name of School, City, State	Degree, Major or Other
High School		
Business/ Tech		
College/ University		
Graduate School		
Other		

*If you did not graduate, did you receive a G.E.D.? YES NO

Please list your work experience beginning with your most recent employment (military experience may be included.)
 Include up to ten years of past employment.

Previous Employment

Employer: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 YES NO
 May we contact your previous supervisor for a reference?

Employer: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 YES NO
 May we contact your previous supervisor for a reference?

Employer: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 From: _____ To: _____ Reason for Leaving: _____
 YES NO
 May we contact your previous supervisor for a reference?

Certifications and Licenses

Type	Issuing Agency	Expiration

Disclaimer and Signature

I, _____, hereby authorize the City of Macedonia and its agents or employees to conduct a background check on me and authorize the release of pertinent information concerning me from any source, including, but not limited to, past employers.

The facts set forth in this application and any supplemental information is true and complete to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be sufficient cause for immediate discharge. I hereby authorize investigation of all statements contained herein and employers listed above to give you any and all information concerning my employment, and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same.

I understand that in connection with the routine processing of my employment application, the City may request from a consumer reporting agency an investigative consumer report including information to my credit records. Upon written request from me, the City, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for the City to hire me. Employment is based on completion of all pre-employment requirements and procedures which may include:

1. Urine drug screen in compliance with the City of Macedonia's Drug Testing Policy
2. Proof of identity and employment eligibility for work in the U.S.
3. Interviews
4. Education and reference checking
5. Consumer report check
6. Psychological Screening/Polygraph (if applicable)
7. Criminal and motor vehicle record check

I, the undersigned applicant for employment, have read this pre-employment disclaimer and agree to its terms and conditions.

Signature: _____ Date: _____