

APPLICATION FOR FULL-TIME EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For			Date of Application		
How Did You Learn About Us?					
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Relative	<input type="checkbox"/> Inquiry	Richmond Heights Website		
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Friend	<input type="checkbox"/> Other	Richmond Heights ListServe		

Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number(s)				Social Security Number	

Best time to contact you at home is::.....^{AM} / ^{PM}

Have you ever filed an application with us before?..... Yes No
If Yes, give date _____

Have you ever been employed with us before? Yes No
If Yes, give date _____

Do any of your friends or relatives work here? Yes No

Are you currently employed?..... Yes No

May we contact your present employer? Yes No

Are you a U.S. citizen? If not, can you provide Work Visa?
Proof of citizenship or immigration status will be required upon employment..... Yes No

Date available for work ____/____/____ What is you desired salary range? _____

Are you available to work: (please indicate 1 2 3 shift)

Are you currently on "lay-off" status and subject to recall? Yes No

Have you ever been convicted of a felony? Yes No
A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.

ADDITIONAL INFORMATION

Other Qualifications

Summarized special job-related skills and qualifications acquired from employment or other experience.

SPECIALIZED SKILLS (CHECK SKILLS/EQUIPMENT OPERATED)

<input type="checkbox"/> Terminal	<input type="checkbox"/> Spreadsheet	Production/Mobile Machinery (list)	Other (list)
<input type="checkbox"/> PC/MAC	<input type="checkbox"/> Word Processing	_____	_____
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Shorthand	_____	_____
WPM _____	WPM _____	_____	_____
		_____	_____

Note to Applicants:

I have received a copy of the job description for the position for which I am applying.

I am aware that this application is valid only for the job opening for which it was submitted.

Signature _____ Date _____

Are you capable of performing the essential functions of this position with or without reasonable accomodation?

YES NO

PERSONAL REFERENCES

1. _____ (Name) _____ (Phone)

(Address: Street _____ City _____ State _____ Zip)

2. _____ (Name) _____ (Phone)

(Address: Street _____ City _____ State _____ Zip)

3. _____ (Name) _____ (Phone)

(Address: Street _____ City _____ State _____ Zip)

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for the job opening for which it was submitted. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature. This means either you or the City may terminate the employment relationship at any time. No entity or individual other than the City Manager is authorized to modify The Personnel Rules and Regulations or enter into any agreement, oral or written, contrary to the policies and procedures contained herein.

In the event of employment, I understand that false or misleading information given in my application or interview(s) will lead to discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

Affirmative Action Data Record

In order to provide equal employment and advancement opportunities to all individuals, it continues to be the policy of the City of Richmond Heights to implement fair, effective and positive personnel and management practices. These practices are designed to insure the full realization of equal employment opportunity without regard to race, color, religion, gender, age, national origin, ancestry, disability or handicap, status of Vietnam-era or special disabled veteran, or status in any other classification whose consideration is prohibited by law.

The purpose for this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic reports are made to the government on the following information. The completion of this Data Record is optional. If you choose to volunteer the requested information please note that all Data Records are kept in a Confidential File and are not a part of your Application for Employment or personnel file. Please note: YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISION.

(Please Print)

Last Name	First Name	Middle Name

Please complete the following sections:

Job Applying For:	
Check One: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Circle One Of The Following: (Ethnic Origin)	
White	Hispanic/Latino
Black	Other
	Asian
	Native Hawaiian/other Pacific Islander
Check If Any Of The Following Are Applicable	
<input type="checkbox"/> Vietnam Era Veteran	<input type="checkbox"/> Disabled Veteran
	<input type="checkbox"/> Disabled Individual
Birth date	

