## CITY OF WENDOVER, TOOELE COUNTY UTAH JOB APPLICATION

1. PERSONA	L INFORMA	ΓΙΟΝ.				7400
Print Name:					Da	ate:
	(last)	(middle)		(first)		
Print Address:						
	(Street)	(	(City)		(State)	(Zip)
Post Office Bo	x Number:					
Phone Number	?:	Social	Security	Number: _	,	
(Use additional	sheets for any e	xplanations you n	nay wish	to give about	answers give	<u>n</u> below)
2. WORK PRE	FERENCE.					
Kind of work de	esired:			Salary or pay	you expect:	
Describe your pr	rior experience	in the kind of wor	rk that yo			
Describe any for	rmal schooling	or training you ha	ve for th			
List any licenses	s, security or bo	nding clearance o	r certific	ates you have	•	
		· · · · · · · · · · · · · · · · · · ·			····	
Office Skills (ty	ping, machine o	operation, comput	er progra	nms):		
		Relative				
state the name o	the agency or	individual):				
3. AVAIL	ABILITY FOR	WORK.				
Date Available f	for work:					
Full tin	ne	_Part Time		Temporary		
Shifts or times y	ou will work:					
Days		_Evenings	<u> </u>	_Graveyards		Rotating
Weeker	nds	_ Holiday(s)				
Will you work d	laily overtime o	n occasion, if nec	essary?	Yes	N	0
		week if necessary		Yes	N	
•		or attend school			Yes	
Do you have any affect your work		litary obligations, Yes		the Guard or I No	Reserves, whi	ch may
4. PRESENT E	MPLOYMENT	5				
Are you presentl	ly employed?	Yes		NO		
Do you authoriz	e the City to co	ntact your present				No
How much adva	nce notice do v	on wich to give to	X/2011# 1019	scont amplaye	D	

5.	PERSONAL HEALTH.
	ffered a position with the City of Wendover, your employment may be conditioned upon the results of a dical examination, drug test, and/or job-related physical ability tests.
6.	PRIOR EVENTS.
em Ha Do Do Ha Ha	ve you earned any pension of or retirement credits, other than Social Security, in any prior ployment? Yes No ve you ever worked for this agency before? Yes No you have any friends or relatives working for Wendover City? Yes No you authorize us to contact your previous employer(s) for references? Yes No ve you ever been terminated by a previous employer (s) Yes No ve you ever been convicted of a felony? Yes No net are your hobbies or interests?
7.	EDUCATION AND TRAINING.
<u>Hi</u>	gh School
Add Dat Ple Did Wh	me of last High School attended:
Add Dar Wh Did Wh Ple	me of last College or University attended:  dress of last College or University attended:  te last attended:  nat was your major?  I you graduate?  Yes  No  nat was your grade point average?  ease circle the highest year of education that you have completed:  13,14,15,16,17,18,19,20  nat degree did you receive?  Bachelors  Masters  Doctorate
	her Schools (Trade, Correspondence, etc.).
Da	me of School attended:

8. EMPLOYMENT HISTORY.	•	
Present Employer:	Supervisor:	
Address:		Phone #:
Dates of Employment, From:		
Main Duties:		
Wages or Salary, Starting:		
Reason(s) for Leaving:		
Previous Employer:	Supervisor:	
Address:		Phone #
Previous Employer:	To:	
Main Duties:		
Wages or Salary, Starting:		
Reason(s) for Leaving:		
Next Previous Employer:  Address:  Dates of Employment From:	Supervisor	
Address:	oapervisor	Phone #
Address: Dates of Employment From:	To:	
Main Duties:		
Wages or Salary, Starting:	Ending:	
Reason(s) for Leaving:		
9. CERTIFICATE OF APPLICAT	ΓΙΟΝ.	
All information on this form is true and of omission or misrepresentation of inform may cause my employment to be termin person, organization, former employer, all questions about me and I agree not to information or expresses an opinion about application for employment and not an employer may terminate me at any time confidentiality of any confidential information agree that the value of any advance pay shall be due upon termination of my employed to me at the time of my termination	eation, may cause my application ated. I authorize any employed or other entity listed in this applicated such and to hold harmless and to hold harmless. I upperformance. I upperfor to employ me. I understant without reason or explanation ation I obtain as a consequence of the property issued to me, or ployment and may be deducted.	on to be rejected or, if I am hired, er accepting this application and any plication to ask or answer any and my person or entity that provides understand that this document is an and that if I am employed, my I f hired, I agree to protect the ce of my employment. If hired, I or other debt I owe my employer
Signature of Applicant	Printed Name of App	licant Date