

CITY OF FINLEY
PO BOX 321
FINLEY, ND 58231

EMPLOYMENT APPLICATION

PERSONAL INFORMATION:

DATE: _____

FULL NAME: _____

ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____

Have you ever been involuntarily terminated or requested to resign? Y or N (circle)

If hired, can you provide verification of your legal right to work in the U.S.? Y or N

SOCIAL SECURITY NUMBER: _____

If you are under age 18, do you have a work permit? Y or N

If required for the position, do you have a valid driver's license? Y or N

If hired, would you have reliable transportation to and from work? Y or N

Have you ever worked under a different name? Y or N

Have you ever been convicted of a felony? Y or N If yes, please explain:

Position Desired: _____ Date that you would be able to start
your first day of work: _____. Salary desired: _____

School level: _____ Course of Study: _____ Grade completed: Graduate: _____

High School: _____

College/University: _____

Post Graduate: _____

Business/Trade Technical _____

Describe background that may be related to the job desired:

2. EMPLOYMENT INFORMATION: (Start with Current or Most Recent Employer)

Company Name:
Phone:
From Mo/Yr: To Mo./Yr.
Job Title:
Supervisor Name:
Reason for Leaving:
Duties:
May we contact this employer? Y or N

Company Name:
Phone:
From Mo/Yr: To Mo./Yr.
Job Title:
Supervisor Name:
Reason for Leaving:
Duties:
May we contact this employer? Y or N

Company Name:
Phone:
From Mo/Yr: To Mo./Yr.
Job Title:
Supervisor Name:
Reason for Leaving:
Duties:
May we contact this employer? Y or N

Please list two (2) references (people) that we may contact about you.

1. _____ Phone #: _____
Years known: _____

2. _____ Phone #: _____
Years known: _____

Your Signature: _____ Date: _____