

Please return application to: City of Crawford – 135 Elm Street – Crawford, NE 69339
308-665-1462 cityclerk@bbc.net

Application For Employment

TO APPLICANT: We deeply appreciate your interest in our organization. Thank you for taking the time to complete this application. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to information obtained from a consumer reporting agency, including but not limited to information regarding credit data, personal character, general reputation and mode of living. This list however, is not exhaustive of the grounds on which discrimination is prohibited. **Job positions are subject to Veteran’s preference. The City of Crawford participates in E-Verify.**

PERSONAL

Date _____

Name _____
Last First Middle

Telephone No. _____

Address _____
No. Street City State Zip

Position(s) applying for _____

Were you previously employed by us? Yes ___ No ___ If yes, when _____

If your application is considered favorably, on what date will you be available for work? _____

Are there any other job related experiences, skills, or qualifications which will be of special benefit in the job for which you are applying? _____

EMPLOYMENT HISTORY

List below present and past employment, beginning with your most recent.

1.

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
Telephone	Describe the work you did:							

2.

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
Telephone	Describe the work you did:							

3.

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
Telephone	Describe the work you did:							

4.

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
Telephone	Describe the work you did:							

I hereby give permission to contact the employers listed above concerning my prior work experience as indicated below:

- Employer 1: Yes No
 Employer 2: Yes No
 Employer 3: Yes No
 Employer 4: Yes No

Signed: _____

RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed	Did You Graduate?	List Diploma or Degree
Elementary		X	5	<input type="checkbox"/> Yes <input type="checkbox"/> No	X
			6		
			7		
High			1	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			2		
			3		
College			1	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			2		
			3		
Other (Specify)			1	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			2		
			3		

PERSONAL REFERENCES (Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number

May we telephone you to at home follow up on this application? Yes ___ No ___

If yes, what is the best time to call? _____

May we telephone you at work to follow up on this application? Yes ___ No ___

If yes, what is the best time to call? _____

What is you business telephone number? _____

PLEASE READ AND SIGN BELOW

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on my application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a writing signed by an officer.

Signature of Applicant