



MURRAY
HUMAN
RESOURCES

MURRAY CITY CORPORATION

APPLICATION FOR EMPLOYMENT

POSITION FOR WHICH YOU ARE APPLYING: _____

Name: _____

Home Phone: _____

Address: _____

Cell Phone: _____

City, State: _____

Zip: _____

Email Address: _____

Type of Employment Desired	Salary Expected	Date Available for Work
<input type="checkbox"/> Seasonal/Summer <input type="checkbox"/> Part Time		

If hired, will you be able to work during the days and hours required for the position for which you are applying? Yes No

If no, please explain: _____

If hired, can you furnish proof that you are at least 18 years of age? Yes No

Do you have a legal right to work in the United States? Yes No

Have you ever been discharged or forced to resign from a position? Yes No If yes, please explain fully: _____

To your knowledge, can you successfully perform the essential functions of the job you are applying for with or without reasonable accommodation? Yes No

List any relatives who are currently employed by Murray City: _____

IMPORTANT INFORMATION

Take time to fill in this section carefully and completely. The information you give will be used to determine your qualifications for employment. It is important that you answer all questions on your application fully and accurately; failure to do so may delay its consideration and could mean loss of employment opportunities.

EMPLOYMENT EXPERIENCE

Start with the most recent employment, give a **complete record** of all employment and reason for periods of unemployment (include military and volunteer service). **Do not state "See Resume". If additional space is needed for your employment record, use a separate sheet of paper.**

Position title:	Dates of employment (month & year) from _____ to _____	Number of hours worked per week:
Employer (company) name and address: _____ _____ _____		Your duties: _____ _____ _____
Phone: _____ Supervisor's name and title: _____	Ending salary: _____ Reason for leaving: _____	
May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain: _____		
Position title:	Dates of employment (month & year) from _____ to _____	Number of hours worked per week:
Employer (company) name and address: _____ _____ _____		Your duties: _____ _____ _____
Phone: _____ Supervisor's name and title: _____	Ending salary: _____ Reason for leaving: _____	
Position title:	Dates of employment (month & year) from _____ to _____	Number of hours worked per week:
Employer (company) name and address: _____ _____ _____		Your duties: _____ _____ _____
Phone: _____ Supervisor's name and title: _____	Ending salary: _____ Reason for leaving: _____	
Position title:	Dates of employment (month & year) from _____ to _____	Number of hours worked per week:
Employer (company) name and address: _____ _____ _____		Your duties: _____ _____ _____
Phone: _____ Supervisor's name and title: _____	Ending salary: _____ Reason for leaving: _____	

PROFESSIONAL REFERENCES

Name	E-Mail Address	Telephone	Occupation	Yrs. Known

LICENSES/CERTIFICATIONS

Please list any professional licenses or certifications that are relevant to the position for which you are applying, for example: CPR, Lifesaving, Water/Wastewater, P.O.S.T., EMT, Paramedic, I.C.C., Commercial Driver License, etc.

SPECIAL SKILLS

Summarize special job-related skills and qualifications acquired from employment or other experience. Include computer related experience, which software programs you have used, machinery or equipment expertise, other skills, etc: _____

DRIVING INFORMATION

Do you have a valid driver license? Yes No State _____

Do you have a commercial driver license (CDL)? Yes No State _____

EDUCATION

Have you graduated from high school or completed the GED equivalent? Yes No

Name and location of high school _____

School Name & Location (Include city and state)	Academic Major	Did you graduate? Yes	Did you graduate? No	Degrees Received
Technical/Business				
College or University				
Graduate/Other				

I certify the information in this application is complete and accurate to the best of my knowledge. Any misrepresentation or omission of facts in this application disqualifies me from further consideration, or, if I am employed, is sufficient cause for dismissal. I do hereby authorize any and all persons, companies, or agencies to release any and all background information, of a confidential or privileged nature, relevant to this application and any pertinent information they may have to the hiring authorities of Murray City Corporation. I release all such parties from all liability of every kind as the result of furnishing the same to Murray City Corporation. This information is to be used to assist the City in determining my qualifications and fitness for the position I am seeking. I hereby release Murray City and its officers, agents, and employees from any liability for the use of any and all of the foregoing information, in consideration for being reviewed for the aforesaid position. I understand that this employment application and any other City documents are not contracts of employment and that any oral or written statements to the contrary are hereby expressly disavowed.

SIGNATURE _____ DATE _____

It is the policy of Murray City to develop, implement and maintain employment policies and practices that are based upon individual merit and are without regard to race, color, gender, sexual orientation, gender identity, marital status, genetics, age, religion, national origin, disability, veteran or citizenship status. In addition, it is the policy of this city to actively promote the realization of equal employment opportunity through voluntary compliance with the concepts and practices of affirmative action.

MURRAY CITY CORPORATION
Affirmative Action Self-Identification Information

It is the policy of Murray City Corporation to provide and promote equal opportunity employment, compensation and other terms and conditions of employment without discrimination because of race, color, sex, national origin, religion, age, marital status, sexual orientation, gender identity, genetics, disability, veteran status, or any other status protected under local, state, or federal laws. The City provides reasonable accommodations to the known disabilities of applicants in compliance with the Americans with Disabilities Act.

To help Murray City Corporation comply with Federal/State equal employment opportunity record-keeping, reporting and other legal requirements, please answer the questions below. Your answers to these questions are completely voluntary and failure to answer them will have no impact upon the decision to hire or not to hire you for the position for which you are applying.

This pre-employment information will be kept in a CONFIDENTIAL FILE separate from the Employment Application.

Position applying for: _____ Date: _____

Last Name _____ First Name _____

Gender		Age		
Male	Female	Under 16	16-17	40 or over
		18-39		

Race/Ethnic Origin	
American Indian/Alaska Native	Hispanic
Asian/Pacific Islander	White
	African American/Black

Definitions of Ethnic Groups

American Indian/Alaska Native - All persons having origins in any of original peoples of North America and who maintain cultural identification through tribal affiliation or community group.

Hispanic - All persons of Mexican, Puerto Rican, Cuban, Central/South American, or other Spanish culture or origin.

Asian/Pacific Islander - All persons having origins in any of original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.

White - All persons having origins in any of the original people of Europe, some North African countries, or the Middle East.

African American/Black - All persons having origins in any of the Black racial groups of Africa.

Do you claim **Veterans Preference**? Yes No If you are claiming veteran or disabled veteran status, please provide a copy of your DD-214 showing dates of service with each application submitted.

Referral Source - How did you learn about this position? Check the one number from the list below:

1. Walk-in/self
2. Murray City website
3. Workforce Services
4. Other internet site: Which? _____
5. College/university placement office: Which? _____
6. Word of mouth/friend/relative/Murray City employee: Which? _____
7. Agency or community group referral: Which? _____
8. Other: specify; _____

MURRAY CITY CORPORATION

DRUG AND ALCOHOL TESTING, PRE-EMPLOYMENT PHYSICAL EXAMINATION AND CRIMINAL HISTORY BACKGROUND CHECK DISCLOSURE

Murray City Corporation has implemented a drug screening program designed to prevent hiring individuals who use illegal drugs, or individuals whose misuse of legal drugs or alcohol may pose safety and health risks not only to the employee, but all those who they serve.

Murray City Corporation is committed to providing a safe, healthy and efficient working place for all of its employees. The unlawful manufacture, distribution, dispensation, possession, or use of controlled substances is prohibited in the workplace. Testing positive for the use of illegal drugs or the misuse of legal drugs, or refusal to consent to the drug test, will be sufficient reason to deny employment.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying, except that no such information will be sought or obtained by the City until after a conditional offer of employment has been made.

I acknowledge that Murray City requires an employment criminal history background check on all new employees/volunteers who are 18 years of age or older.

My signature indicates I have read this document and understand its implications.

Signature

Date