

## EDUCATION

Name of last Grade, Junior or Senior High School Attended	Location (City & State)	Please Indicate: Diploma <input type="checkbox"/> GED <input type="checkbox"/>																
Names and location of all Colleges, Universities, Business, Correspondence or Trade Schools attended.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Full or Part-Time</th> <th style="width: 15%;">No. of Credits Earned</th> <th style="width: 15%;">Semester or Quarter</th> <th style="width: 55%;">Majors and Minors Course(s) of Study</th> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>	Full or Part-Time	No. of Credits Earned	Semester or Quarter	Majors and Minors Course(s) of Study													Type of Degree, Certificates License Earned.
Full or Part-Time	No. of Credits Earned	Semester or Quarter	Majors and Minors Course(s) of Study															

## EXPERIENCE

List employment for the last 10 yrs (begin with most recent position). If jobs held prior to 10 yrs relate to position applied for, list these also. Explain gaps in employment. You may attach additional sheets. You may also attach a resume. An incomplete application may disqualify you from further consideration.

Mo. & Yr. From: _____ To: _____	Title of Your Position: _____ Salary: _____
Name/Address of Employer:	Duties Performed:
Name/Ph# of Supervisor:	
May we contact your employer: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Reason for Leaving:	No. Supervised (if any): _____ No. of hours per week: _____
Mo. & Yr. From: _____ To: _____	Title of Your Position: _____ Salary: _____
Name/Address of Employer:	Duties Performed:
Name/Ph# of Supervisor:	
May we contact your employer: Yes <input type="checkbox"/> No <input type="checkbox"/>	
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May we contact your employer: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Reason for Leaving:	No. Supervised (if any): _____ No. of hours per week: _____

**CERTIFICATION OF APPLICANT (READ CAREFULLY BEFORE SIGNING)** I, the undersigned, hereby certify that all statements contained herein are true and correct to the best of my knowledge. I understand that any false or misleading statements are grounds for the City to reject my employment application, remove my name from an eligibility list, or dismiss me from employment. Further, if hired, I may be required to submit verification of any information provided on this application, as well as verification of my legal right to work in the U.S.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_