

# City of Gladbrook Employment Application

Position(s) applied for: \_\_\_\_\_ Date of application: \_\_\_\_\_

How were you made aware of this position: \_\_\_\_\_ Date available for work: \_\_\_\_\_

## PERSONAL INFORMATION

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Best Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Are you legally eligible for employment in this country?  
(Proof of this status will be required upon employment)                      Yes                      No

Have you filed an application with us before?                      Yes                      No

If yes, give date(s): \_\_\_\_\_

Have you ever been employed with us before?                      Yes                      No

If yes, give date(s): \_\_\_\_\_

Have you ever been convicted of, or pled guilty to, a felony  
Such as fraud, embezzlement or misappropriation of funds,  
Or false use of financial instruments, or of any crime involving  
Honesty?                      Yes                      No

## LIST ANY RELATIVES EMPLOYED BY THE CITY OF GLADBROOK

Full Name	Location/Position	Relationship

## EMPLOYMENT HISTORY

List **all** your work experience – including employers, assignments and volunteer activities – since you initially entered the work force or most recent 10 year period. Please complete at least three “employers” if you have had that many regardless of the length of time you were with each one. Include military experience. Explain any gaps in employment in the comments section below.

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Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Immediate Supervisor and Title: \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_ Starting/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_  
Final/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_

Summarize the nature of the work performed and job responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

If you are currently employed, may we contact your present employer for a reference now? Yes No

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Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Immediate Supervisor and Title: \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_ Starting/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_  
Final/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_

Summarize the nature of the work performed and job responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

If you are currently employed, may we contact your present employer for a reference now? Yes No

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Address: \_\_\_\_\_  
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Final/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_

Summarize the nature of the work performed and job responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

If you are currently employed, may we contact your present employer for a reference now? Yes No

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 Address: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Immediate Supervisor and Title: \_\_\_\_\_  
 Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_ Starting/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_  
 Final/Salary: \$ \_\_\_\_\_ per \_\_\_\_\_

Summarize the nature of the work performed and job responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
 If you are currently employed, may we contact your present employer for a reference now? Yes No

Comments (including explanation of any gaps in employment):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**LIST THREE PROFESSIONAL OR BUSINESS PEOPLE WHO HAVE KNOWN YOU AT LEAST THREE YEARS. DO NOT LIST RELATIVES.**

<u>Full Name</u>	<u>Complete Mailing Address &amp; Phone Number</u>	<u>Occupation or Business</u>	<u>Years Known</u>

While we have a wide variety of jobs with differing functions, there are some things that experience has indicated are uniform to the great bulk of positions. Please respond to the following questions:

Are you aware of any circumstances that would preclude you, on a regular or periodic basis, from attending the full schedule of work?	Yes	No
Are you able to engage in repetitive bending?	Yes	No
Are you able to routinely lift up to 30 pounds to waist height?	Yes	No

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## EDUCATIONAL BACKGROUND

List Name and Location of High School,  
College, Trade or Business Schools Attended

Dates

Diploma or  
Degree

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## SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment, education or other experiences that may qualify you for work with us.

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List any additional information you would like us to consider:

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## IMPORTANT AUTHORIZATION AND UNDERSTANDING

1. **Completeness and accuracy of information.** I represent that all of the information now or hereafter given by me in support of my application for employment is true and complete. I understand that any false or misleading information in support of my application may subject me to discharge **at any time** during the period of my employment.
2. **Authorization for release of information and release from liability.** I authorize you to verify any of the information given during the application process with appropriate individuals, companies, institutions, or agencies and I authorize them to release such information as you require, including my prior disciplinary employment record, without any obligation to give me written notice of disclosure. I hereby release you and them from any liability whatsoever as a result of such inquiries and disclosures. A photocopy or other electronic reproduction of this authorization/release is binding, and may be relied upon.
3. **No written, oral, or implied contracts.** I understand that any written City of Gladbrook documents, oral statements, or formal or informal policies are not to be construed as granting an express or implied employment contract and that I am not entitled to rely upon any such documents, statements or policies as stating employment terms. The employment relationship with the City of Gladbrook may be modified only in writing directed to me by the Mayor of the City of Gladbrook.
4. **Benefits may be altered.** I understand that the City of Gladbrook at its option may change, delete, suspend, or discontinue any part or parts of its benefit program at any time without prior notice, both while persons are actively employed and while retired from the City of Gladbrook.

**I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND, AND ACCEPT THE ABOVE TERMS.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE INCLUDE WITH THIS COMPLETED APPLICATION WITH COVER LETTER AND RESUME IF AVAILABLE.**