

City of Broken Bow
Public Works Authority
Kulli Chito Environmental Authority
APPLICATION FOR EMPLOYMENT
 Must be completed in blue or black ink.

ALL AREAS MUST BE COMPLETED

Personal

Name Last _____ First _____ Middle Initial _____

Phone _____ Social Security # _____

Present Address _____

Number Street City State Zip

Position Applied For: _____

Have you ever been convicted of a felony offense within the past 10 years EXCEPT any conviction that has been expunged, sealed, or otherwise overturned or is part of juvenile record? Yes ___ No ___ If yes, please explain. A conviction will not automatically bar an applicant from employment consideration. _____

Are you legally authorized to work in the United States? Yes ___ No ___

Would you work Full time ___ Part time ___ Temporary ___

What shifts are you willing to work? Day Evening Night All (circle all that apply)

Have you ever worked for the the City of Broken Bow or an associated trust thereof? Yes ___ No ___ If yes, when and what position? _____

EMPLOYMENT HISTORY

List each job held, beginning with current or most recent, including military service. Add additional page if necessary.

If no employment history put N/A.

| Employer | Job Title/Work Performed | Employed | |
|------------------|--------------------------|----------------------------|------------------|
| Address _____ | | From Date MO/YR | To Date MO/YR |
| Supervisor _____ | | Hourly Rate/Salary (Final) | |
| Phone # _____ | | Reason for leaving _____ | |

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| EDUCATION AND TRAINING | | |
|------------------------|-------------------------|------------|
| School Name | Location (City & State) | Graduated? |
| High School: | | |
| College/University: | | |
| Other: | | |

Are you known to schools/refernces by another name? Yes ___ No ___ If yes, by what name? _____

E-mail address _____

If hired when could you start work? _____

Are any friends or relatives employed by us? Yes ___ No ___ If yes, please list.

| | | | | | |
|------|-------|--------------|-------|------|-------|
| Name | _____ | Relationship | _____ | Dept | _____ |
| Name | _____ | Relationship | _____ | Dept | _____ |
| Name | _____ | Relationship | _____ | Dept | _____ |

Summary of skills specific to position for which you are applying

Please read before signing this application

I understand that my employment is contingent upon satisfactory backgrounds reports. Any omission or any individual who is hired may voluntarily leave upon proper notice, and may be terminated by the City or Trust at date it was made. This certifies that I agree with the above information and that all entries on this application and all

Applicants Signature _____

Date _____