City of Bells
Crossroads of Friendliness

Employment Application

The City of Bells is an Equal Employment Opportunity Employer.

"We respect and value our employees".

Job Application

Date of Application: _____

Position applied for: _____

Personal details

First name: _____ Last name: _____

Preferred name:

Address (Do Not Use Post Office Box):

Telephone:

Email:

Emergency Contact & Telephone:

Do you have a High School Diploma or GED? ☐ Yes ☐ NO

Name of High School you graduated/obtained GED from: _____

What is the highest level of education you have received? _____

Education/Qualifications

Degree/Certifications	Institution /Training Provider	Date

List All Licenses/Qualifications (attach copies of license/certificates)

_____

_____

_____

_____

Employment (previous first)

Employer Name/Location	Dates from/to	Position held	Reason for leaving

May we contact your current/previous employer(s)? ☐ Yes   ☐ No

References:

Name	Telephone No.	Position held/working relationship

What type of work are you available for?	Full Time ☐	Part Time ☐	Seasonal ☐
When will you be available to work?			

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR CLASS B OR HIGHER MISDEMEANOR FROM ANY STATE?

If Yes, give details and disposition: (attach any supporting documentation)

_____

_____

Please provide any other information that you identify as being pertinent to this application (medical conditions, disabilities)

_____

_____

Declaration

I declare that, to the best of my knowledge, the information given is true and correct. I understand that inaccurate, misleading or untrue statements or knowingly withheld information may result in termination of employment with the City. I understand that this application does not constitute an offer of employment.

_____

Signed: Date:

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Notification and Authorization to Release Criminal Information
for Employment Purposes

Notification

The position for which I am being considered requires me to consent to a criminal background check as a condition of employment. This check includes the following: Criminal history reference searches for felony, misdemeanor and sex offender registry convictions.

Authorization

I hereby authorize the City of Bells to conduct a criminal background check as described above. In connection with this, I also authorize the use of law enforcement agencies and/or private background check organizations to assist the City of Bells in collecting this information. Additionally, I consent to a pre-employment drug test and will be subject to random drug test(s) after being employed.

I also am aware that records of arrests on pending charges and/or convictions are not an absolute bar to employment. Such information will be used to determine whether the results of the background check reasonably bear on my trustworthiness or my ability to perform the duties of my position in a manner which is safe for the City of Bells.

Position(s) Applied for: _____

Please print (for identification purposes):

Full Legal Name: _____
                First   Middle   Last

Other Names You Have Used in Past: _____

Date of Birth: _____ Gender: ☐ Female ☐ Male Social Security Number: _____

Driver's License # _____ State of Driver's License:_____

Current Address: _____

_____

Previous Address (most recent): _____

Phone Number: _____ Alternate Phone Number: _____

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Have you ever been convicted of a criminal offense or have any pending criminal charges against you?

(This refers only to felonies and misdemeanors; you do not need to include non-criminal traffic violations or municipal ordinance violations)

Yes ☐   No ☐

To the best of my knowledge, the information provided in this Notice and Authorization and any attachments thereto is true and complete. I understand that any falsification or omission of information may disqualify me for this position and/or may serve as grounds for the severance of my employment with the City of Bells. By signing below, I hereby provide my authorization to the City of Bells to conduct a criminal background check. I understand that I have a right to appeal an adverse employment decision made by the City of Bells based on my background check information within three business days of receipt of such notice and that a determination on my appeal will be made in seven working days from the City of Bells receipt of such appeal.

_____   _____

Signature   Date