

Return to:
City of Hartford
125 North Main Avenue
Hartford, SD 57033

Position applied for: _____

Application for Employment
City of Hartford, South Dakota

ALL APPLICANTS
ARE SUBJECT TO
DRUG SCREENING
PRIOR TO HIRE.

Equal Employment Opportunity Statement
The City of Hartford does not discriminate on the
basis of race, color, national origin, sex, religion, age or
disability in employment or the provision of services.

(Special accommodations for application and/or testing or job information in alternative formats available upon request.)

Name: _____ Over 18 Yes ___ No ___
Last First Middle

Address: _____
Number Street City State Zip

Home Phone: _____ Cell Phone: _____

Email Address: _____

Please answer all questions. Statements are subject to verification.

Have you ever been convicted of a felony? Yes ___ No ___ If yes, please give details: _____

Criminal convictions are not an absolute bar to employment, but will only be considered in relation to specific job requirements.

Have you ever been employed by the City of Hartford? Yes ___ No ___

Department _____ From _____ to _____ Position _____

Shift available: Days ___ Evenings ___ Nights ___ Weekends ___ Any Hours ___

Number of hours: Full-Time Only ___ Part-Time Only ___ Either ___

Education and Training

Name of School and Location	Years completed circle Or write in answer	Graduated? Circle answer	Major
High School City	9 10 11 12	GED yes no	
College or University City	1 2 3 4	yes no	
Graduate School City		yes no	
Business or Vocational School City		yes no	

(Proof of U.S. Citizenship or immigration status will be required upon employment.)

Are you legally eligible for employment in this country? Yes _____ No _____

Licenses or certificates:

Professional License: _____ Licensing Board: _____

Do you have a driver's license? Yes _____ No _____ License No. _____ State _____ Expiration Date _____

If no, do you have a work permit? Yes _____ No _____

Do you have a commercial driver's license (CDL)? Yes _____ No _____ License No. _____ State _____ Expiration Date _____

EMPLOYMENT RECORD

Please list the most recent position first. Account for all time periods by recording all of your activities, such as employment, military service, volunteering, schooling, and periods of unemployment. Use additional paper if necessary. Be sure you answer all questions. (Current employer will be contacted only with your consent.) Be complete! You will be screened using the information you provide. *A resume can be attached.*

1. Employer: _____ Position Title: _____
Address: _____ Responsibilities: _____
From (Mo/Yr) _____ To (Mo/Yr) _____
Reason for leaving: _____
Supervisor _____ Salary: \$ _____
Were you required to have a CDL? Yes _____ No _____

2. Employer: _____ Position Title: _____
Address: _____ Responsibilities: _____
From (Mo/Yr) _____ To (Mo/Yr) _____
Reason for leaving: _____
Supervisor _____ Salary: \$ _____
Were you required to have a CDL? Yes _____ No _____

3. Employer: _____ Position Title: _____
Address: _____ Responsibilities: _____
From (Mo/Yr) _____ To (Mo/Yr) _____
Reason for leaving: _____
Supervisor _____ Salary: \$ _____
Were you required to have a CDL? Yes _____ No _____

4. Employer: _____ Position Title: _____
Address: _____ Responsibilities: _____
From (Mo/Yr) _____ To (Mo/Yr) _____
Reason for leaving: _____
Supervisor _____ Salary: \$ _____
Were you required to have a CDL? Yes _____ No _____

PRE-EMPLOYMENT AGREEMENT
(Please read these carefully and sign.)

I understand and agree that:

1. If I misrepresent or deliberately leave out a fact in my application, I may be refused employment or, if employed, I may be terminated.
2. The City has my authorization to thoroughly investigate my work, medical, and personal history that is job-related. I will hold no person, corporation, or organization liable for giving or receiving information in this investigation.
3. In consideration of my employment, I agree to conform to the rules and regulations of the City and I understand that no representative of the City has any authority to enter into any agreement, oral or written, for employment for any specified period of time or to make any agreement or assurances contrary to this policy.
4. Any doctor, hospital, or testing laboratory may conduct medical tests and I hereby give my consent to having all information released necessary for the City to determine my abilities to perform job duties now or in the future.
5. Passing the pre-employment physical examination, including a drug and alcohol screening test is a pre-requisite for qualifying for employment. If a job offer is made, I understand it is conditioned on this requirement. Failure to provide accurate medical information will be considered grounds for dismissal.
6. Any costs incurred by the City in conjunction with employment shall be reimbursed to the City if employment is not fulfilled.
7. City ordinance requires all full-time employees to reside within 10 miles of the city limits within six months of employment.
8. The City is an equal opportunity employer. The City does not discriminate and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state or federal law.
9. If employed, I understand that my employment is for no definite period of time, and if terminated the City is liable only for wages and salary and benefits earned as of the date of termination.
10. I understand that an appointment shall not be deemed complete until a probation period of 180 days has elapsed as a new employee or a 90 day probation period for a promotion transfer.
11. I have read and agree to the above and hereby certify that the facts I have provided in my employment application are true and complete.
12. This application is current and active for only the position applied for, and it will be necessary for me to fill out a new application for other positions that may be available.

Signature of applicant

date

AUTHORIZATION FOR REFERENCE AND BACKGROUND REQUESTS

I have applied with the City of Hartford for employment and I desire that they be fully advised of my records from previous employers for the past two years which pertain to required drug and alcohol testing. I, therefore, respectfully request that you furnish the requested information concerning my employment with your organization, and I hereby release you from any and all liability of damages for providing the information requested.

Signature of applicant

date