



CITY OF
HAYDEN
 IDAHO

8930 N Government Way Hayden, Idaho 83835

APPLICATION FOR EMPLOYMENT

<p><i>The City of Hayden is an equal opportunity employer. All applicants are considered on the basis of qualifications and ability without regard to race, religion, color, sex, age, national origin or disability.</i></p>		
PERSONAL INFORMATION		
Name: (Last, First, MI)		Present Address: Street: _____ City: _____ State: _____ ZIP _____
Home Phone Number:		Permanent Address: (If different) Street: _____ City: _____ State: _____ ZIP _____
Email Address:		
Work, Message, and/or Cell Phone Number:		
POSTION INFORMATION		
Position Desired:		Date Available for Employment:
Salary Range Desired:	Are you willing to work:	Full Time? ___ Part-Time? ___ Temporary? ___ Evenings? ___ Weekends? ___ Shifts? ___
Do you have relatives employed by the City of Hayden? Yes ___ No ___ If Yes, in what position: _____		Have you ever applied to the City of Hayden before? Yes ___ No ___ If Yes, For What Position: _____ Date of Application: _____
EDUCATION		
Do you have a high school diploma or equivalent (GED)?		
Circle the highest grade completed – not including college: 1 2 3 4 5 6 7 8 9 10 11 12		
Undergraduate School Attended: (Name, Location)		
GPA: _____	Dates Attended: _____	Degree Earned: No ___ Yes ___ Type _____
Graduate School Attended: (Name, Location)		
GPA: _____	Dates Attended: _____	Degree Earned: No ___ Yes ___ Type _____
Post Graduate School Attended: (Name, Location)		
GPA: _____	Dates Attended: _____	Degree Earned: No ___ Yes ___ Type _____
Other (Other):		
GPA: _____	Dates Attended: _____	Degree Earned: No ___ Yes ___ Type _____
<p><i>If you require additional space for education institutions, please attach paper to the application following the above format.</i></p>		
Coursework completed that relates to position for which you are applying:		
Special training complete that relates to position for which you are applying:		



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Application For Employment – Page 2		Name (Last, First)	
WORK EXPERIENCE THE INFORMATION IN THIS SECTION IS REQUIRED - DO NOT USE "SEE RESUME" (Start with most recent employer.)			
Name of Previous Employer:		Type of Business:	
Address:		Supervisor's Name/Title:	
Your Title:		Supervisor's Phone Number:	
Duties/Responsibilities (Be Specific)		May We Contact? (Y/N)	
		Date Started:	Date Ended:
		Salary:	
Reason for Leaving:			
Name of Previous Employer:		Type of Business:	
Address:		Supervisor's Name/Title:	
Your Title:		Supervisor's Phone Number:	
Duties/Responsibilities (Be Specific)		May We Contact? (Y/N)	
		Date Started:	Date Ended:
		Salary?	
Reason for Leaving?			
Name of Previous Employer:		Type of Business:	
Address:		Supervisor's Name/Title:	
Your Title:		Supervisor's Phone Number:	
Duties/Responsibilities (Be Specific)		May We Contact? (Y/N)	
		Date Started:	Date Ended:
		Salary?	
Reason for Leaving?			
Use blank copy of this page to add more employment history if needed.			



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Application For Employment – Page 3		Name (Last, First)		
OTHER INFORMATION RELATED TO POSITION				
List any experiences and/or skills that you feel would especially qualify you for this position:				
Typing Skills _____WPM	Licenses/Certificates	Seminars/Training	Associations/Memberships	Computer/Software
<p><i>As required under the Immigration Reform and Control Act, any person working for the City of Hayden, regardless of the nature of the job or the number of hours or months employed, will be required to show proof of identity and work eligibility.</i></p> <p>Do you legally have the right to work in the U.S.? Yes _____ No _____</p>				
<p>Have you ever been convicted of a felony? Yes* _____ No _____ If you checked yes, when were you convicted? _____ (Date)</p> <p>*Checking yes does not automatically eliminate you from consideration.</p> <p>If you checked yes, please describe the nature of the offense for which you were convicted.</p> <p>_____</p>				
SIGNATURE OF APPLICANT				
<p>I certify that all information given on this application is true, correct, and complete to the best of my knowledge. I also certify that I have accounted for all of my work, experience, and training on this application, and that I have not knowingly withheld any fact or circumstance which could, if disclosed, affect my application unfavorably.</p> <p>The City of Hayden is hereby authorized to make any investigation of my employment, educational or background history through investigative agencies or bureaus of its choice. I release all relevant parties from all liability of any damages resulting from furnishing such information.</p> <p>If employed by the City of Hayden, I agree to abide by its rules and regulations. I understand that discovery of misrepresentation or omission of facts herein will make me ineligible for employment or be cause for immediate dismissal. I agree to furnish additional information as may be required to complete my employment file. I understand that operating conditions may require me to temporarily and/or regularly work shifts other than the one for which I am applying and I agree to such scheduling change as directed by my supervisor.</p> <p>I have read and reviewed the description of the job for which I am applying. I understand that I must be capable of performing the essential functions of the job effectively and safely, with or without reasonable accommodations.</p> <p>I also understand that my employment may be subject to the successful completion of an employment physical examination, and that my continued employment may be conditioned upon satisfactorily continuing to meet job-related physical and mental requirements. If requested, I agree to submit to a job-related physical examination performed by a qualified medical person of the City of Hayden's choice. Such exam shall be paid for by the City of Hayden. I also agree that all information concerning said physical examination can be supplied to the City of Hayden, or an authorized agent of this municipality, upon their request.</p> <p>I further understand that the City of Hayden is committed to providing a safe, productive, and efficient work environment and to employing a work force free from the use of illegal drugs, either on or off the job. As a condition of hiring, some applicants may be required to submit to a pre-employment drug and alcohol test conducted by the City of Hayden's authorized representative. Applicants will provide a urine sample for drug testing. The test results will be maintained in a confidential file, and only released to the City of Hayden, its representatives, or as otherwise authorized or required by law. The applicant releases the City of Hayden and its representatives from all liabilities relating to the drug testing carried out under this policy, including, without limitation, the release of the test results. Any applicant who fails to report for a test, refuses to take a test, fails to provide a specimen, tampers with a test specimen or who is identified with verified positive test results will be denied employment at that time if the testing is required as part of their position. Applicants identified with verified positive test results may reapply after one (1) year from the date of the initial test with proof of successful completion of a rehabilitation program through a state-licensed facility.</p> <p>I understand that this is an application for employment and that no employment contract, either express or implied, is being offered. I also understand that if employed, such employment is for an indefinite period and can be terminated at will be either party, with or without notice, at any time, for any or no reason, and is subject to change in wages, conditions, benefits, and operating policies.</p>				
Date _____		Signature of Applicant _____		



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PROFESSIONAL REFERENCES

<i>Application For Employment – Page 4</i>	Applicant's Name (Last, First)
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Give the names of three persons not related to you, whom you have known for at least one year.

References		
Name	Occupation/Title	Years Known
Address	Phone Number	E-Mail
Supervisor? ___ Co-Worker? ___ Other? Please specify _____		
Name	Occupation/Title	Years Known
Address	Phone Number	E-Mail
Supervisor? ___ Co-Worker? ___ Other? Please specify _____		
Name	Occupation/Title	Years Known
Address	Phone Number	E-Mail
Supervisor? ___ Co-Worker? ___ Other? Please specify _____		

I authorize the City of Hayden to make any investigation of my employment, educational or background history through investigative agencies or bureaus of its choice. I release all relevant parties from all liability of any damages resulting from furnishing such information.

Signature of Applicant

Date