City Hall (913) 352-8257 www.pleasantonks.com

CITY OF PLEASANTON APPLICATION FOR EMPLOYMENT

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	mile mile	A	-7	T.			1 2.1

PERSONAL INFORMATION					
In order to ensure this applicate fully completed in order for it to			rint or type on th	ne applicatio	n being
FULL NAME:			DATE:		
First	Middle	Last			
ADDRESS:Street Address			Apt/Su	ite	
City	Stat	e	Zip Co	de	
E-MAIL:	E-MAIL: PHONE:				
SOCIAL SECURITY NUMBER	R (SSN):	-	-		
DATE AVAILABLE: DES			PAY: \$	🗆 HOURL	Y □ SALARY
POSITION APPLIED FOR: _					
EMPLOYMENT DESIRED:] FULL-TIME	☐ PART-TIME	☐ SEASONAL		
HOW DID YOU LEARN ABOUT US ¹ ☐ FREIND ☐ RELATIVE					
	EMPLOY	MENT ELIGIE	BILITY		
ARE YOU PREVENTED FRO *Proof of citizenship or immigration s HAVE YOU EVER WORKED	tatus will be re	quired upon emplo			E U.S?* □ NO
*IF YES, WRITE THE START AN	ID END DATI	ES:			
DO ANY OF YOUR FRIENDS OR RELATIVES WORK HERE? YES* NO *IF YES, STATE NAME AND RELATIONSHIP:					□ №
HAVE YOU EVER BEEN COI				☐ YES*	□ NO

CAN YOU TRAVEL, IF THE JOB REQUIRES IT?

MAY WE CONTACT YOUR PRESENT AND/OR PAST EMPLOYER?

□ №

□ №

☐ YES

☐ YES

EDUCATION

HIGH SCHOOL:	CITY / STATE:	
FROM:	TO:	
GRADUATE? ☐ YES ☐ NO	DIPLOMA:	
COLLEGE:	CITY / STATE:	
FROM:	TO:	
GRADUATE? ☐ YES ☐ NO	DEGREE:	
OTHER:	CITY / STATE:	
FROM:	TO:	
DEGREE/CERTIFICATION:		
OTHER:	CITY / STATE:	
FROM:	TO:	
DEGREE/CERTIFICATION:		
	PREVIOUS EMPLOYMENT	
EMPLOYER 1:Company / Individ	dual	
	PHONE	<u>=</u> :
4DDDE00	-	
Street Address		Apt/Suite
Street Address	State	Apt/Suite Zip Code
City	State ☐ HOURLY ☐ SALARY ENDING PAY: \$_	Zip Code
City STARTING PAY: \$		Zip Code ☐ HOURLY ☐ SALARY
City STARTING PAY: \$	□ HOURLY □ SALARY ENDING PAY: \$_	Zip Code ☐ HOURLY ☐ SALARY
City STARTING PAY: \$ JOB TITLE:	□ HOURLY □ SALARY ENDING PAY: \$_	Zip Code HOURLY SALARY
City STARTING PAY: \$ JOB TITLE:	□ HOURLY □ SALARY ENDING PAY: \$ RESPONSIBILITIES:	Zip Code HOURLY SALARY

EMPLOYER 2:	mpany / Individual	
SUPERVISOR:	PHONE:	
ADDRESS: Street A	Address	Apt/Suite
City	State	Zip Code
STARTING PAY:	\$ □ HOURLY □ SALARY ENDING PAY: \$	🗆 HOURLY 🗆 SALARY
JOB TITLE:	RESPONSIBILITIES:	
FROM:	TO:	
REASON FOR LE	AVING:	
EMPLOYER 3:		
Cor	mpany / Individual	
	mpany / Individual PHONE:	
SUPERVISOR:	PHONE:	
SUPERVISOR:	PHONE:	
SUPERVISOR: ADDRESS: Street A	PHONE:	Apt/Suite Zip Code
SUPERVISOR: ADDRESS: Street A	PHONE:	Apt/Suite Zip Code
SUPERVISOR: ADDRESS: Street A City STARTING PAY: S	PHONE:	Apt/Suite Zip Code HOURLY SALARY
SUPERVISOR: ADDRESS: Street A City STARTING PAY: S JOB TITLE:	PHONE: Address State \$ DAY: \$	Apt/Suite Zip Code HOURLY SALARY
SUPERVISOR: ADDRESS: Street A City STARTING PAY: S JOB TITLE:	PHONE: State State HOURLY SALARY ENDING PAY: \$ RESPONSIBILITIES:	Apt/Suite Zip Code HOURLY SALARY

OTHER TRAINING, PROFESSIONAL, TRADE, ACTIVITIES AND OFFICE HELD

OTHER QUALIFICATIONS: SUMMARIZE SPECIAL JOB-RELATED SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCE.				
	MILITARY S	ERVICE		
ARE YOU A VETERAN?				
BRANCH:	RANK AT	DISCHARGE:		
FROM:	TO:			
TYPE OF DISCHARGE: _				
IF NOT HONORABLE, PLE	EASE EXPLAIN:			
	REFEREI (PROFESSION	NCES AL ONLY)		
FULL NAME:	Last	RELATIONSHIP:		
COMPANY:		TITLE:		
E-MAIL:		PHONE:		
FULL NAME: First	Last	RELATIONSHIP:		
COMPANY:		TITLE:		
E-MAIL:		PHONE:		
FULL NAME:	Last	RELATIONSHIP:		
COMPANY:		TITLE:		
E-MAIL:		PHONE:		

BACKGROUND CHECK CONSENT

THE FOLLOWING MUST BE FILLED OUT COMPLETELY FOR YOUR APPLICATION TO BE CONSIDERED.

ARE YOU WILLING TO CONSENT TO	A BACKGROUND CHECK? ☐ YES ☐ NO
Other Names used:	
Previous Full Address:	
Sex: Race:	Date of Birth:
	State of license:
*Note: Date of birth, sex, and race are being accurate retrieval	requested only for purpose of identification in obtaining
	DISCLAIMER
I certify that answers given herein are true and co	mplete.
	ed in this application for employment as may be necessary in that this is an Equal Opportunity Employer and City of Pleasanton
	red active for a limited period of time. Any applicant wishing to be od should inquire as to whether or not application are being
with City of Pleasanton is of an "at will" nature, wh Employer, City of Pleasanton, may discharge emp	s otherwise defined by applicable law, any employment relationship nich means that the Employee may resign at any time and the ployee at any time with or without cause. It is further understood that changed by any written document or by conduct unless such change orized executive of City of Pleasanton.
	and honest to the best of my knowledge. I understand that any false erview may result in my employment being terminated. I understand, egulations of City of Pleasanton.
SIGNATURE	DATE
Office use only:	
Date received:	
Time received:	
Received by:	
Forwarded to:	