

EXPERIENCE: It is your responsibility to show that you meet the minimum qualifications of the position applied for. Provide enough information to allow for evaluation of your work experience and abilities. List the positions held within the last five(5) years, starting with your most recent job. If you held more than one position with the same employer, list each position separately. Include relevant volunteer experience. If more space is needed, request additional Experience sheets.

This section must be completed. A resume may accompany your completed application, but will not be accepted in lieu of completing any part of the application. Applications that reference "see resume" in the "Experience" section will be rejected as incomplete.

From: _____ To: _____ Salary: _____ Hours per week: _____ Title of Position: _____

Employer name: _____ Supervisor: _____

Employer Address: _____ City: _____ State: _____ Zip Code: _____

Reason for leaving: _____

From: _____ To: _____ Salary: _____ Hours per week: _____ Title of Position: _____

Employer name: _____ Supervisor: _____

Employer Address: _____ City: _____ State: _____ Zip Code: _____

Reason for leaving: _____

From: _____ To: _____ Salary: _____ Hours per week: _____ Title of Position: _____

Employer name: _____ Supervisor: _____

Employer Address: _____ City: _____ State: _____ Zip Code: _____

Reason for leaving: _____

From: _____ To: _____ Salary: _____ Hours per week: _____ Title of Position: _____

Employer name: _____ Supervisor: _____

Employer Address: _____ City: _____ State: _____ Zip Code: _____

Reason for leaving: _____

Please list 3 references other than relatives and previous employers

Name: _____ Years Known: _____ Telephone: _____ email: _____

Name: _____ Years Known: _____ Telephone: _____ email: _____

Name: _____ Years Known: _____ Telephone: _____ email: _____

Use this space to add any additional information necessary to describe your full qualifications for the position which you are applying:

Applicant Certification: Please read before signing. I certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I authorize the City of Taft to investigate all statements contained in this application and its attachments. I understand that statements made are subject to verification and that any misrepresentation, fraud or omission of material facts may be grounds to deny City employment or to initiate disciplinary action, including dismissal for cause, after employment. The submission of this application and its acceptance by the City of Taft does not constitute an expressed or implied contract or offer of employment.

Signature _____ Date _____

IF YOU REQUIRE SPECIAL TESTING ARRANGMENT TO ACCOMMODATE A DISABILITY YOU MUST CONTACT HUMAN RESOURCES AT LEAST 72 HOURS PRIOR TO THE TEST DATE TO ALLOW HUMAN RESOURCES TO PROPERLY REVIEW AND EVALUATE YOUR REQUEST.

Attach Resume/Documents

List Of Attachments