

Application for Employment

CITY OF NORTHPORT

Post Office Box 569
Northport, Alabama 35476
(205) 339-7000

Dear Applicant,

We welcome you as an applicant for employment. Your application will be considered with others. It is our policy to provide equality of opportunity in employment. This policy prohibits discrimination on the basis of race, color, religion, national origin, political affiliation, disability, marital status, sex, age, or disability which does not prevent successful performance of job duties, in all aspects of our personnel policies, programs, practices and operations. This policy applies to full-time, part-time, temporary, and seasonal employment.

The information contained in this application will be considered personal and confidential and used only in conjunction with your possible employment. Please furnish us with complete information. You are encouraged to attach any additional information which you believe qualifies you for the position. If you need assistance in completing this application, please let the personnel office know.

*****AN EQUAL OPPORTUNITY EMPLOYER**

Position Applied for: _____

SOCIAL SECURITY # _____ - _____ - _____

Full Name: _____
Last First Middle

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (Cell): _____ (Residence): _____

Date of birth: _____ (Police Officer and Dispatcher applicants only)

A "YES" response may not prevent you from being offered a job for certain positions. If you answered "YES" to any of the following questions, **attach an explanation on a separate sheet of paper.**

1. Have you ever been involuntarily terminated or forced to resign from a position? () YES () NO
2. Have you ever been convicted of, pleaded guilty or no contest to a law violation other than a minor traffic violation? () YES () NO

On what date would you be available for work? _____

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EDUCATION

Circle the highest
Grade completed

Grade School
1 2 3 4 5 6 7 8

High School
9 10 11 12 or GED

College
13 14 15 16

Post Graduate
MA Phd LLB

Types of School	Name and Address of School	Diploma, Degree or Certificate	Major
High School			
College or University			
College or University			
Graduate School			
Technical			
Technical			

List any professional licenses, registrations, or certificates that you possess.

CDL#(Commercial Drivers License) _____ Endorsements _____

Have you ever served in the Armed Forces of the United States? ()YES ()NO

If "YES" Which branch: _____

Duties: _____

Special training (if any): _____

Rank at time of Discharge: _____

WORK HISTORY

THIS SECTION MUST BE COMPLETED REGARDLESS OF WHETHER OR NOT A RESUME IS ATTACHED

Beginning with your PRESENT or most recent employment, list in REVERSE ORDER periods of employment. Each time you changed jobs or your title changed should be listed as a separate period. Be sure to describe your military experience, if any. Describe in detail your specific duties beginning with your primary duties. (Attach additional sheets if necessary)

1. Current or Last Employer					Your Official job Title					
Address				Phone:			Type of Business			
FROM Month Year		TO Month Year		Total Months	If part-time number of hours per week _____	Beginning Salary		Ending Salary		May we contact employer () Yes () No
						\$ _____ per _____	\$ _____ per _____			
Supervisor's Name				Equipment you Operated			Reason for Leaving			
Describe your Duties in Detail:										
2. Employer					Your Official job Title					
Address				Phone:			Type of Business			
FROM Month Year		TO Month Year		Total Months	If part-time number of hours per week _____	Beginning Salary		Ending Salary		May we contact employer () Yes () No
						\$ _____ per _____	\$ _____ per _____			
Supervisor's Name				Equipment you Operated			Reason for Leaving			
Describe your Duties in Detail:										
3. Employer					Your Official job Title					
Address				Phone:			Type of Business			
FROM Month Year		TO Month Year		Total Months	If part-time number of hours per week _____	Beginning Salary		Ending Salary		May we contact employer () Yes () No
						\$ _____ per _____	\$ _____ per _____			
Supervisor's Name				Equipment you Operated			Reason for Leaving			
Describe your Duties in Detail:										

