

SALINA CITY CORPORATION

JOB APPLICATION

1. PERSONAL INFORMATION.

Name: Date:
Street Address: City: State: Zip:
Phone: Social Security Number:

(Use additional sheets for any explanations you may wish to give about answers given below)

2. WORK PREFERENCE.

Kind of work desired: Salary or pay you expect:
Describe your prior experience in the kind of work that you want:
Describe any formal schooling or training you have for this work:
List any licenses, security or bonding clearance or certificates that you have:
Office skills (typing, machine operation, computer programs):
Referral Source: Friend Relative Employment Agency Other
(Please state the name of the agency or individual):

3. AVAILABILITY FOR WORK.

Date available for work: Full time Part time Temporary
Shifts or times that you will work: Days Evenings Graveyards Rotating
 Weekends Holidays
Will you work daily overtime on occasion, if necessary? Yes No
Will you work extra days in the week, if necessary? Yes No
Do you want to work elsewhere or attend school while working here? Yes No
Do you have any continuing military obligations, such as the Guard or Reserves, which may affect your work schedule? Yes No

4. PRESENT EMPLOYMENT.

Are you presently employed? Yes No
Do you authorize us to contact your present employer as a reference? Yes No
How much advance notice do you wish to give to your present employer?

5. PERSONAL HEALTH.

If offered a position with Salina City, your employment may be conditioned upon the results of a medical examination, drug tests, and/or job-related physical ability tests.

6. PRIOR EVENTS

Have you earned any pension or retirement credits other than Social Security, in any prior employment? Yes No

Have you ever worked for this agency before? Yes No

Do you have any friends or relatives working for Salina City? Yes No

Do you authorize us to contact your previous employer(s) for references? Yes No

Have you ever been terminated by a previous employer(s) ? Yes No

Have you ever been convicted of a felony? Yes No

What are your hobbies or interests?

7. EDUCATION AND TRAINING.**High School.**

Name of last High School attended:

Address of last High School attended:

Date last attended:

Please select the highest year completed: K 1 2 3 4 5 6 7 8 9 10 11 12

Did you graduate? Yes No

What was your grade point average? on a scale of 1 to

College or University.

Name of last College or University attended:

Address of last College or University attended:

Date last attended:

What was your major in ?

Did you graduate? Yes No

What was your grade point average? on a scale of 1 to

Please circle the highest year of education that you have completed: 13 14 15 16 17 18 19 20

What degree did you receive? Bachelors Masters Doctorate

Other Schools (Trade, Correspondence, ect.).

Name of School attended:

Address of School attended:

Date last attended:

What was your major in?

Did you graduate?

What degree did you receive?

8. EMPLOYMENT HISTORY.

Present Employer: Supervisor:
Address: Phone #:
Dates of Employment. From: To:
Main Duties:
Wages or Salary. Starting: Ending:
Reason(s) for Leaving:

Present Employer: Supervisor:
Address: Phone #:
Dates of Employment. From: To:
Main Duties:
Wages or Salary. Starting: Ending:
Reason(s) for Leaving:

Present Employer: Supervisor:
Address: Phone #:
Dates of Employment. From: To:
Main Duties:
Wages or Salary. Starting: Ending:
Reason(s) for Leaving:

9. CERTIFICATE OF APPLICATION.

All information on this form is true and correct to the best of my knowledge. I understand that any omission or misrepresentation of information may cause my application to be rejected or, if I am hired, may cause my employment to be terminated. I authorize any employer accepting this application and any person, organization, former employer, or other entity listed in this application to ask or answer any and all questions about me and I agree not to sue and to hold harmless any person or entity that provides information or expresses an opinion about me or my performance. I understand that this document is an application for employment and not an offer to employ me. I understand that if I am employed, my employer may terminate me at any time without reason or explanation. If hired, I agree to protect the confidentiality of any confidential information I obtain as a consequence of my employment. If hired, I agree that the value of any advance payment, property issued to me, or other debt I owe my employer shall be due upon termination of my employment and may be deducted from wages or other payments owed to me at the time of my termination of employment.

Signature of Applicant

Printed Name of Applicant

Date