# **EMPLOYMENT APPLICATION**

# An Equal Opportunity Employer

| If you believe you require an accommodation durin   | ng the selection process,                         | please contact us to make | e appropriate arrangements. |
|---|---|---------------------------|-----------------------------|
| Name  | Date  |                           |                             |
| Address   |   |                           |                             |
| City  | State   | Zip Code                  |                             |
| Email address:  |   |                           |                             |
| Telephone(s) Home ( )   |   |                           | )                           |
| Position Applied for  |   |                           |                             |
| How did you hear about this position?   |   |                           | )                           |
| □ Other (explain)   |   |                           |                             |
| If offered employment, when will you be availab   |   |                           |                             |
| What type of employment will you accept?  | □ Full-Time                                       | □ Part-Time               | □ Temporary                 |
| Will you be available for shift work?   |   | □Yes □No                  |                             |
| Will you be available to work weekends and/or h<br>Have you been given a job description or had th                    |   |                           |                             |
| explained to you?   |   |                           |                             |
| Do you understand the job requirements?   |   |                           |                             |
| Can you perform the essential functions of this j accommodation?  |   |                           |                             |
| To qualify for employment, applicants must be a otherwise specified in the job announcement. If furnish proof of age? | at least 18 years of age<br>f offered employment, | e unless<br>can you       |                             |
| After an offer of employment, can you submit ve<br>work in the United States?   |   |                           |                             |
| List other names, if any, you have used   |   |                           |                             |

#### EDUCATION RECORD

| Did you graduate from high scho | ool or receive a GED | certificate | ? 🗆 Yes             | s 🗆 No               |
|---------------------------------|----------------------|-------------|---------------------|----------------------|
|                                 |                      | Hours       | Diploma, Degree, or |                      |
| School Name                     | Location             | Earned      | Certificate         | Major Field of Study |
| Business/Technical/Vocational   |                      |             |                     |                      |
| 1.                              |                      |             |                     |                      |
| 2.                              |                      |             |                     |                      |
| College/University              |                      |             |                     |                      |
| (Undergraduate)                 |                      |             |                     |                      |
| 1.                              |                      |             |                     |                      |
| 2.                              |                      |             |                     |                      |
| Graduate School                 |                      |             |                     |                      |
|                                 |                      |             |                     |                      |

# LICENSES (Optional, unless required for the position for which you are now applying.)

List current licenses, certifications, or registrations required for the position for which you are applying. Indicate types, state license numbers, and expiration dates.

| Answer only if position requires   |                   |   |            |
|------------------------------------|-------------------|---|------------|
| Do you possess a valid driver's    | license?          | □ Yes □ No                                |            |
| If so, license expires             | Class             | Restrictions (if any)                     | _          |
| For positions that require typing  | j: I certify that | at I can type at a speed ofWPM.           |            |
| In addition to English, list any o | ther language a   | abilities you possess.                    |            |
| Verbal fluency in                  |                   |   | _          |
| \ A /                              |                   |   | _          |
| List any special skills you posse  | ess and/or equip  | pment or office machines you can operate. |            |
|                                    |                   |   |            |
|                                    |                   |   |            |
| OTHER INFORMATION                  |                   |   |            |
| Have you ever been disciplined     | in your employ    | ment related to workplace violence?       | 🗆 Yes 🛛 No |
| lf yes, please explain.            |                   |   |            |
|                                    |                   |   |            |
| Do you presently use illegal dru   | ıgs?              |   | □ Yes □ No |
| Have you ever been employed        | by the City of E  | El <b>y</b> ?                             | □ Yes □ No |
| If yes, please provide the follow  | ving information  | :   |            |
| Department                         |                   | Position Title                            |            |
| Dates of Employment                | Rea               | ason for Separation                       |            |
| Are you related to anyone who      | is currently emp  | ployed by the <b>City of Ely</b> ?        | □ Yes □ No |
| If yes, please provide the follow  |                   |   |            |
| Related person's name              |                   |   |            |
| Relationship                       |                   |   |            |

### THIS SECTION IS TO BE COMPLETED ONLY IF YOU ARE APPLYING FOR A POSITION: • AS A PEACE OFFICER OR FIREFIGHTER.

- WHICH HAS ACCESS TO THE NEVADA CRIMINAL JUSTICE INFORMATION SYSTEM OR THE NATIONAL CRIME INFORMATION CENTER.
- WHICH A STATE OR FEDERAL LAW REQUIRE CRIMINAL HISTORY INFORMATION.

Have you ever been convicted of, pled guilty or nolo contendere to, or been granted deferred adjudication for a felony, misdemeanor (excluding juvenile adjudication), or any lesser crime other than a minor traffic infraction?..... Yes O

Do you have any pending court charges that have not been adjudicated?.....

If you have answered yes to either question, list all such offenses and provide date, name of court, and disposition (if any). You may omit minor traffic violations for which you paid a fine of \$50 or less. Omission of information may be considered cause for disqualification from the employment pre-screening process or result in termination of employment.

#### FOR POSITIONS, OTHER THAN THOSE IDENTIFIED ABOVE:

- The criminal history of an applicant will only be considered after the final interview which is conducted in person or an offer of employment has been made, whichever occurs first.
- **The City of Ely** may, before selecting an applicant as a finalist or extending a conditional offer, notify the applicant of any provisions of law that disqualify a person with a particular criminal history from employment in a particular position.
- A record of conviction will not necessarily bar the applicant from employment. Factors to be considered when looking at records of criminal history include:
  - Length of time passed since the offense;
  - Age of applicant at the time of the offense;
  - Severity and nature of the offense;
  - Relationship of the offense to the position applying for; and
  - Evidence of rehabilitation of the applicant.
- The following will not be considered:
  - Arrests which did not result in a conviction;
  - o Record of convictions that were dismissed, expunged, or sealed; and
  - Infractions or misdemeanors for which a sentence of imprisonment in a county jail was not imposed.

#### **EMPLOYMENT HISTORY**

| you are applying for). Volu provided. Describe your r | ding all paid employment (include military employment if duties/assignments relate to the job<br>unteer work which may be related to the position for which you are applying should also be<br>nost recent position first; then list other positions in order held. Use a separate block for each<br>ame employer. Use additional sheets if necessary. Do <b>NOT</b> use references such as "See<br>bleting this section. |
|---|---|
| May we contact all employ                             | yers listed? (Attach a list of any exceptions with an explanation.) □ Yes □ No  |
| Present Employer                                      | Present Position  |
| Address   | From (Mo/Yr)To (Mo/Yr)  |
| City  | □ Full-Time (30+ hrs/wk) □ Part-Time (<30 hrs/wk)   |
| State   | _Zip Code   |
| Supervisor's Name/Title<br>Related Duties:            | Telephone()   |
| <br>Reason for Leaving:                               |   |
| Employer  | Position  |
| Address   | From (Mo/Yr)To (Mo/Yr)  |
| City  | □ Full-Time (30+ hrs/wk) □ Part-Time (<30 hrs/wk)   |
| State   | _Zip Code   |
| Supervisor's Name/Title<br>Related Duties:            | Telephone()   |
| Reason for Leaving:                                   |   |
| Employer  | Position  |
| Address   | From (Mo/Yr)To (Mo/Yr)  |
| City  | □ Full-Time (30+ hrs/wk) □ Part-Time (<30 hrs/wk)   |
| State   | _Zip Code   |
| Supervisor's Name/Title<br>Related Duties:            | Telephone()   |
| Reason for Leaving:                                   |   |

| Employer                                   |          | Position                 |                          |
|--|----------|--------------------------|--------------------------|
| Address                                    |          |                          | To (Mo/Yr)               |
| City                                       |          | □ Full-Time (30+ hrs/wk) | □ Part-Time (<30 hrs/wk) |
| State                                      | Zip Code |                          |                          |
| Supervisor's Name/Title<br>Related Duties: | e        | Telephone()              |                          |
| Reason for Leaving:                        |          |                          |                          |
| Employer                                   |          | Position                 |                          |
| Address                                    |          | From (Mo/Yr)             | To (Mo/Yr)               |
| City                                       |          | Full-Time (30+ hrs/wk)   | □ Part-Time (<30 hrs/wk) |
| State                                      | Zip Code |                          |                          |
| • · · · · · ·                              | e        | Teleph                   | one <u>(</u> )           |
| Supervisor's Name/Title<br>Related Duties: |          |                          |                          |

Please state below any other information that would be helpful in determining your qualifications for this position. You may include significant accomplishments, previous career highlights, or any other relevant information that is not requested in this employment application.

#### ACKNOWLEDGMENTS

Please **READ ALL** of the following statements and **INITIAL EACH** of the lines to indicate you have read and understand each of the statements. If you have any questions, contact Janette Trask, (Human Resources Department).

All offers of employment and all information regarding compensation and other terms and conditions of employment will be made in writing. Verbal statements may not be relied upon.

- \_\_\_\_\_ This application is the property of the **City of Ely** and will become part of my personnel file if I am hired.
- I authorize the **City of Ely** to contact any employer or individual to obtain from them any relevant information regarding my previous employment, military service, criminal history, characteristics or traits necessary for job performance, or other relevant qualifications for employment and/or continued employment with the **City of Ely**. In addition, I authorize the **City of Ely** to conduct a background search which includes criminal history and military history. In addition, if the position for which I am applying requires driving a vehicle, I authorize the **City of Ely** to conduct a Department of Motor Vehicles (DMV) search. If the position for which I am applying involves contact with minors or with any persons having diminished capacity to care for themselves, a search of government sex offender registries may be conducted. I further authorize the **City of Ely** to contact any institution and/or licensing authority to verify my possession of education, licenses, and/or certificates which may qualify me for employment.
- In exchange for the **City of Ely** consideration of my employment application, and/or any continued employment with the **City of Ely**, I authorize anyone possessing information to furnish it to the **City of Ely** upon request, and I release the organizations and all individuals providing the information or acquiring the information, including the **City of Ely**, from all claims, liability, and damages whatsoever claimed to be related to furnishing, obtaining, or using said information. This release applies to, but is not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.

I further understand this consent will apply during the entire course of my employment with the **City of Ely** should I obtain such employment. I understand and agree this consent shall remain in affect indefinitely.

I hereby certify that all statements made in this application are true. I understand that any false statement of material facts herein may cause forfeiture on my part of all rights to any employment with the **City of Ely**. I understand that any misrepresentation, falsification, or material omission of information may result in my failure to receive an offer, or if I have been hired, in my dismissal from employment regardless of length of employment. I understand that neither this document nor any offer of employment from the **City of Ely** constitutes an employment contract unless a specific contract document to that effect is executed. I agree to undergo any job-related drug screening and physical examination upon conditional offer of employment. I understand that the **City of Ely** is not requesting genetic information from the drug screening or the physical examination and that the person administering the examination should not provide genetic information to the **City of Ely**. I further understand and agree that this paragraph applies to any information supplied by me at a later date as part of this application.

Per NRS 281.060 (2), I opt to exercise my rights by voluntarily attaching a copy of my DD214. NRS 281.060(2) states preference must be given, *if qualifications of applicants are equal*: a) first, to an honorably discharged military personnel of the United States who is a citizen of Nevada; and b) second, to other citizens of Nevada.

Additionally, my signature below certifies that the information provided is true and correct to the best of my knowledge.

| Signature of Applicant |
|------------------------|
|------------------------|

Date