



Application For Employment

CITY OF PITTSBURG
201 West 4th Street
P.O. Box 688
PITTSBURG, KANSAS 66762
Phone: 620-231-4100
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**CITY OF PITTSBURG, KANSAS
EMPLOYMENT APPLICATION**

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. The City of Pittsburg is committed to the policy of equal employment opportunity in recruiting, hiring, career advancement, and all other personnel practices.

(Please Print Clearly)

NAME _____ Social Security No. _____
(Last) (First) (Middle)

ADDRESS _____
(Street) (City) (State) (Zip)

HOME PHONE _____ MESSAGE PHONE _____ WORK PHONE _____ EMAIL _____

MAY WE CONTACT YOU AT WORK? YES NO

PART TIME APPLICANTS are you 14 or over? Yes No 16 or over? Yes No

FULL TIME APPLICANTS are you 18 or over? Yes No

POLICE APPLICANTS are you 21 or over? Yes No

LIBRARY APPLICANTS have you ever worked in a library before? Yes No If so, what type? _____

IF APPLYING FOR A LIBRARY POSITION, please include a resume with your application.

ARE YOU LEGALLY ABLE TO WORK IN THE UNITED STATES? Yes No

POSITION(S) OF INTEREST #1 _____ #3 _____
#2 _____ #4 _____

WHAT ARE YOUR SALARY EXPECTATIONS? _____

CERTIFICATES AND LICENSES: _____

DRIVER'S LICENSE NO. _____ STATE _____ EXPIRATION DATE _____

LIST ANY RELATIVES CURRENTLY EMPLOYED BY THE CITY OF PITTSBURG

<u>Name</u>	<u>Relationship</u>	<u>Department</u>
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EDUCATION/TRAINING

Name and Location of High School _____ Graduated: YES NO GED: YES NO

Name and Location of College _____ MAJOR _____ DEGREE _____

Semester Hours completed _____ Concentration _____

Name and Location of Trade or Technical School _____ COMPLETED? YES NO

SPECIAL SKILLS AND QUALIFICATIONS

DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP SKILLS, AND EXTRA CURRICULAR ACTIVITIES:

SUMMARIZE SPECIAL JOB-RELATED SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT, MILITARY, OR OTHER EXPERIENCE: _____

EMPLOYMENT HISTORY

(List the last three jobs you have had. List your last or present job first)

NAME OF EMPLOYER _____ LAST JOB TITLE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE _____

DATES EMPLOYED FROM _____ TO _____ NAME & TITLE OF SUPERVISOR _____

MAY WE CONTACT? YES NO EMPLOYMENT WAS FULL-TIME PART-TIME HOURLY RATE/SALARY _____ FINAL: _____

LIST JOB DUTIES _____

REASON FOR LEAVING _____

NAME OF EMPLOYER _____ LAST JOB TITLE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE _____

DATES EMPLOYED FROM _____ TO _____ NAME & TITLE OF SUPERVISOR _____

MAY WE CONTACT? YES NO EMPLOYMENT WAS FULL-TIME PART-TIME HOURLY RATE/SALARY _____ FINAL: _____

LIST JOB DUTIES _____

REASON FOR LEAVING _____

NAME OF EMPLOYER _____ LAST JOB TITLE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____ PHONE _____

DATES EMPLOYED FROM _____ TO _____ NAME & TITLE OF SUPERVISOR _____

MAY WE CONTACT? YES NO EMPLOYMENT WAS FULL-TIME PART-TIME HOURLY RATE/SALARY _____ FINAL: _____

LIST JOB DUTIES _____

REASON FOR LEAVING _____

PAST INCIDENTS

Have you pleaded guilty, no contest to, or been convicted of 1) a felony, or 2) a lesser crime which involved theft, dishonesty or violence in the past seven (7) years? YES NO

If YES, describe the nature of the offense(s) and the county and state where convicted. _____

Have you had your driver's license suspended or revoked within the past five (5) years? YES NO

If YES, list the state which suspended or revoked the license and the reason(s) for each suspension or revocation

Have you been disciplined or fired by a previous employer in the past five (5) years? YES NO

If YES, why?

HOURS AVAILABLE TO WORK

_____ Sunday _____ Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday

What shift are you available for?

_____ Morning _____ Afternoon _____ Evening

Please read carefully and sign

AUTHORIZATION

I hereby authorize the City of PITTSBURG to investigate all statements made in this application, review my driving and criminal records, and to contact my previous employers. I understand that any false statements made herein may eliminate my application from employment consideration, or if discovered after hire, may result in my discharge from employment.

If hired, I will conform to the policies, rules and regulations of the City of PITTSBURG, as described in the Employee Handbook.

I agree to submit to a complete physical examination including drug testing if requested by the City. I also agree to sign the "Authorization to Release Information" form if so requested by the City,

And

ACKNOWLEDGMENT OF AT WILL EMPLOYMENT

I acknowledge that both my employment and my compensation CAN BE TERMINATED AND/OR CHANGED AT WILL, without prior notice and at the sole option of the City of Pittsburg. I understand that no representative of the City of PITTSBURG has any authority to enter into any agreement hiring me for a specified period of time, or to make any agreement contrary to this acknowledgment.

Applicant's Signature

Date