## CITY OF EVANSVILLE EMPLOYMENT APPLICATION

### HUMAN RESOURCES DEPARTMENT Civic Center Complex, Room 203 1 NW Martin Luther King Jr. Boulevard Evansville, IN 47708

Applicants are considered for positions with the City of Evansville without regard to race, religion, color, sex, national origin, age, marital or veteran status, disability or any other legally protected status.

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	(PLEASE PRINT)				
Position Desired	Announcement Number				
Are you available to work: ☐ Full-Time	□ Part-Time □ Temporary □ Seasonal	I			
Date of Application					
Last Name	First Name		Aiddle Name		
Street Address	City	S	State/ZIP		
Telephone Number	Email Address	Social Secu	ırity Number		
Are you legally eligible for employment in (Proof of US Citizenship or immigration status		□ Yes	□ No		
Are you on layoff and subject to recall?		□ Yes	□ No		
Will you work overtime if required?	□ Yes	□ No			
Will you agree to a "Post-Employment Of	□ Yes	□ No			
Have you ever been bonded?		☐ Yes	□ No		
Are you currently employed?		□ Yes	□ No		
May we contact you at work if necessary?	•	□ Yes	□ No		
	Telephone Number				
If employed and under 18, can you furnis	h a work permit?	☐ Yes	□ No		
When would you be available to start wor	·k? □ Immediately □ After 2 we □ Other				
Have you been employed here before?		□ Yes	□ No		
If "YES", when?	Department				

THE CITY OF EVANSVILLE IS AN EQUAL OPPORTUNITY EMPLOYER

## LIST PREVIOUS EMPLOYMENT BELOW (Start with current/most recent employer - Explain any gaps in employment)

1. Name and Address of Employer	Dates of Employment From To
	Final Pay Rate
	Your Job Title
Telephone Number	Supervisor's Name
Your Job Duties	Reason for Leaving
1. Name and Address of Employer	Dates of Employment From To
	Final Pay Rate
	Your Job Title
Telephone Number	Supervisor's Name
Your Job Duties	Reason for Leaving
·	
1. Name and Address of Employer	Dates of Employment From To
	Final Pay Rate
	Your Job Title
Telephone Number	Supervisor's Name
Your Job Duties	Reason for Leaving
If "No", list number of emp	□ Yes □ No  bloyer(s) not to contact: □ Yes □ No :
Branch of Service	
ist any business, professional, trade or civic organizations and offices	- ·
ender, race, color, religion, ancestry, disability or other protected stat	us)

EDUCATION	High School		Undergraduate College or University					Graduate/ Professional						
School Name and Location (City, State)														
Years Completed	9 1	0 1	1	12	1	2	. ,	3	4	-	1 2	2	3	4 .
Diploma/Degree	•		ı	<u> </u>					*					
Describe Course of Study														
Describe any Specialized Training, Apprenticeship, Skills and Extra-Curricular Activities														
Describe Any Honors You Have Received			,											
State Any Additional Information You Feel May be Helpful to Us in Considering Your Application														
Copies of Transcripts, Degree Please list any licenses, special skills, knowledge or abilities which y	•				-			whic	eh you	have :	appli	ied:		
related to you and are not previous employers.  1						\$								
APPLICANT AGREEMI							uı	ıder	stand		P T	nisr	epre	sent o
The information I have provided herein is correct and complete	to to the	best	of 1	шу ки	UMICUE			LUCI	JULIA	that if	$\mathbf{L}$	ALUX.		
Evansville to contact previous employers, except where otherwise no authorization to investigate my personal history for job-related pur	nployme oted, for	nt or, refer	if e ence	mploy and v	ed, I m erificat	ay t ion	oe t	erm state	inated ments	. I au made	thor . Th	ize 1e (	City	has m
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# CITY OF EVANSVILLE SUPPLEMENTAL DATA SHEET

The City of Evansville, as an Equal Opportunity Employer, opens all positions to members of all race/gender groups. To maintain records on our ability to attract applicants from all groups and to provide information concerning our hiring practices, we ask that you voluntarily provide information concerning your status. You are not required to provide this information. The information will not be used in the consideration of your application or at any time during the selection process.

NAME (Last, First, Middle Initial)	SOCIAL SECURITY NO. BIRTH DATE				
GENDER  □ Female □ Male	RACE/ETHNIC GROUP  Two or More Races  American Indian/Alaskan Native  Asian/Pacific Islander  Black or African American  Hispanic or Latino  White				
VETERAN STATUS  Are you a Veteran?  Are you a Vietnam Era Vetera	□ Yes □ No				

#### **DEFINITIONS**

AMERICAN INDIAN OR ALASKAN NATIVE - All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

ASIAN OR PACIFIC ISLANDER - All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

BLACK OR AFRICAN AMERICAN - (Not of Hispanic Origin) All persons having origins in any of the Black racial groups in Africa.

HISPANIC OR LATINO - All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

WHITE - (Not of Hispanic Origin) All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.