



CITY OF TRINIDAD

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: It is important that you answer all questions on this application fully and accurately. Failure to do so may delay its consideration and could mean loss of employment opportunities. If an item does not apply to you, or if there is no information to be given, please write the letters "NA" for Not Applicable. Please print or type.

The City of Trinidad considers all applicants for employment without regard to race, color, religion, ethnicity, gender, national origin, age, physical handicap, or any other protected status or classification in accordance with state and federal laws. The City of Trinidad also provides "reasonable accommodations" to qualified individuals with known disabilities, in accordance with the Americans with Disabilities Act.

Position applying for: _____ Date: _____

Name: _____
Last First Middle

Address: _____
City State Zip Code

Telephone _____ Cell Phone _____

Email address _____

Are you a US Citizen? Yes No - If no, do you have the legal right to work in the United States? Yes No
It will be necessary to submit documents as required by law to verify your identification and employment authorization upon employment.

Have you previously applied with the City of Trinidad? Yes No - If Yes, date of application _____

Have you ever been employed with the City of Trinidad? Yes No
If Yes, dates of employment _____ to _____ Job title _____

Are you currently employed? Yes No May we contact your present employer? Yes No

Are you on a layoff or subject to recall? Yes No Are you willing to travel if a job requires it? Yes No

Are you available to work: Full time Part time Temporary Shift work Date available _____

EDUCATION AND TRAINING

Did you graduate from high school or receive your GED? Yes No - If no, list highest grade completed _____

If yes, list high school or GED agency _____

Additional education: List colleges, trade schools, or other forms of training above the high school level.

Name of School or Program	Diploma, Degree or Certification received	Subject

List computer skills / programs you have used:

List machines or equipment operated

List any additional training, technical skills, or professional knowledge that would support your application:

EMPLOYMENT HISTORY

List your employment experience, beginning with your current or most recent employer and work back. Include military experience and account for periods during which you were unemployed.

Employer: _____ Dates employed _____ to _____

Address: _____
City State Zip Code

Telephone _____ Supervisor's Name _____

Job title _____ Hours worked _____

Duties performed:

Reason for leaving or wanting to leave

Employer: _____ Dates employed _____ to _____

Address: _____
City State Zip Code

Telephone _____ Supervisor's Name _____

Job title _____ Hours worked _____

Duties performed:

Reason for leaving or wanting to leave

EMPLOYMENT HISTORY (cont)

Employer: _____ Dates employed _____ to _____

Address: _____
City State Zip Code

Telephone _____ Supervisor's Name _____

Job title _____ Hours worked _____

Duties performed:

Reason for leaving or wanting to leave _____

Employer: _____ Dates employed _____ to _____

Address: _____
City State Zip Code

Telephone _____ Supervisor's Name _____

Job title _____ Hours worked _____

Duties performed:

Reason for leaving or wanting to leave _____

Please explain any lapses in employment history

Have you been fired or asked to resign from any job within the past 10 years? Yes No

If yes, please explain:

REFERENCES – List 3 references, excluding relatives

Name	Occupation	Dates known	Telephone

ADDITIONAL INFORMATION: Provide any additional information that you feel may be helpful to the City in arriving at a decision concerning your qualifications for employment.

OPTIONAL INFORMATION:

Have you ever served in the US Armed Forces? Yes No – If yes, what branch of service _____

List dates of service and type of discharge _____

List duties in the service, including special training that is relevant to the position for which you are applying.

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in disqualification or discharge. I also understand that I am required to abide by all rules and regulations of the City of Trinidad.

Signature of Applicant

Date

APPLICATIONS ARE KEPT ON FILE FOR THIRTY DAYS ONLY