

CITY OF BARTLESVILLE

APPLICATION FOR EMPLOYMENT AN EQUAL OPPORTUNITY EMPLOYER

APPLICATION DATE:		L	AST FOUR DIG	ITS OF SOC	CIAL:		
LAST NAME:	FIRST NAME:	M.I.:	E-MAIL ADE	DRESS:			
STREET ADDRESS:			HOME PHO				
CITY:	STATE: ZIP C	ODE:	DATE YOU WILL BE AVAILABLE TO BEGIN WORK:		EGIN WORK:		
ARE YOU CURRENTL OF BARTLESVILLE?	Y OR WERE YOU PREVIOUSLY EMPLOYED BY THE CITY	CIRCLE ONE:	L	JNDER 18?		OVER 18?	
	TO ANY CITY OF BARTLESVILLE EMPLOYEE, FORMER NCIL MEMBER? GIVE NAMES AND RELATIONSHIP:	:	RK (PLEASE (PART TIME	CIRCLE) WEEKENDS	SHIFTS	SUMMER/TEMP	VOLUNTEER
HAVE YOU EVER PLE OF, A MISDEMEANOR	IF CURRENTLY OR PREVIOUSLY EMPLOYED WITH THE CITY OF BARTLESVILLE, DEPARTMENT:						
	THE DATE(S) AND DETAILS:	FROM:		TO:			
HAVE YOU BEEN ARE ON BAIL OR ON YOU	FOR DRIVING RELATED POSTIONS: DO YOU HOLD A CURRENT OKLAHOMA DRIVERS LICENSE?						
IF YES, PLEASE GIVE	THE DATE(S) AND DETAILS:	FOR DRIVING HAS YOUR LIC	ENSE EVER	BEEN REVOKEI	O OR SUSPI	ENDED?	
AN AUTOMATIC BAR	YES' TO THESE QUESTIONS DOES NOT CONSTITUTE TO EMPLOYMENT. FACTOS SUCH AS AGE AND TIME OF OUSNESS AND NATURE OF THE VIOLATION, AND THE	FOR DRIVING PLEASE PROV		SITIONS: S LICENSE NUM	BER:		
REHABILITATION WIL	L BE TAKEN INTO ACCOUNT.	EXPIRATION D	ATE:		(CLASS:	

	EDUCATION AND TRAININ	G				
DID YOU GRADUATE FROM HIGH SCHOOL?	HIGHEST YEAR C	HIGHEST YEAR OF SCHOOL COMPLETED:				
DO YOU HAVE A GED?	HIGH SCHOOL OF	HIGH SCHOOL OR GED RECEIVED FROM?				
COLLEGE OR UNIVERSITY NAME:	MAJOR:	MINOR:	YEAR:	DEGREE:		
LOCATION:	FROM: TO:		HC	DURS COMPLETED:		
COLLEGE OR UNIVERSITY NAME:	MAJOR:	MINOR:	YEAR:	DEGREE:		
LOCATION: Cleveland, OH	FROM: TO:	I	HC	HOURS COMPLETED:		
BUSINESS,	VOCATIONAL, TECHNICAL, CORRES	SPONDENCE SCHOO	LS			
SCHOOL NAME:	LOCATION:					
TYPE OF COURSE WORK:	DID YOU COMPLE	DID YOU COMPLETE?		IF YES, WHEN:		
SCHOOL NAME:	LOCATION:	LOCATION:				
TYPE OF COURSE WORK:	DID YOU COMPLE	DID YOU COMPLETE?		IF YES, WHEN:		
LIST THREE INDIVIDUALS WHO ARE NOT RE	REFERENCES: ELATED TO YOU WHO WILL RECOMN	MEND YOU AS TO CH	IARACTER, TRA	AINING AND ABILITY.		
REFERENCE NAME:	ADDRESS:	ADDRESS:		CONTACT PHONE:		
REFERENCE NAME:	ADDRESS:	ADDRESS:		CONTACT PHONE:		
REFERENCE NAME:	ADDRESS:	ADDRESS:		CONTACT PHONE:		

DECINI)	EMPLOYMENT HISTORY WITH PRESENT OR LAST POSITION	1	
NAME & ADDRESS OF EMPLOYER:	DATES OF EMPLOYMENT FROM:	TO:	SALARY/WAGE:
JOB TITLE:	DESCRIBE IN DETAIL THE TYPE	OF WORK PERFORMED:	
SUPERVISOR'S NAME & TITLE:	SUPERVISOR PHONE NUMBER:		
REASON FOR LEAVING:	SUPERVISOR EMAIL:		
NAME & ADDRESS OF EMPLOYER:	DATES OF EMPLOYMENT FROM:	TO:	SALARY/WAGE:
JOB TITLE:	DESCRIBE IN DETAIL THE TYPE	OF WORK PERFORMED:	
SUPERVISOR'S NAME & TITLE:	SUPERVISOR PHONE NUMBER:		
REASON FOR LEAVING:	SUPERVISOR EMAIL:		
NAME & ADDRESS OF EMPLOYER:	DATES OF EMPLOYMENT FROM:	TO:	SALARY/WAGE:
JOB TITLE:	DESCRIBE IN DETAIL THE TYPE	OF WORK PERFORMED:	
SUPERVISOR'S NAME & TITLE:	SUPERVISOR PHONE NUMBER:		
REASON FOR LEAVING:	SUPERVISOR EMAIL:		
WERE YOU EVER DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION?	IF YES, WHY?		
MAY WE CONTACT YOUR PRESENT EMPLOYER?	MAY WE CONTACT YOUR PREVI	OUS EMPLOYERS?	
IF WE MAY NOT, PLEASE INDICATE REASON:			

SKILLS INVENTORY

THE CITY OF BARTLESVILLE. PROFICIENCY/CERTIFICATIONS/LICENSES IN TRADES:	OFFICE/SOFTWARE SKILLS
PLUMBING	TEN-KEY BY TOUCH
CARPENTRY	MICROSOFT WORD
ELECTRICAL	MICROSOFT EXCEL
HEAT AND AIR	MICROSOFT ACCESS
AUTO MECHANICS	MICROSOFT POWERPOINT
ELECTRONICS	MICROSOFT ACTIVE DIRECTORY
DRAFTING	MICROSOFT EXCHANGE
SURVEYING	CAD/GEOGRAPHIC INFORMATION SYSTEMS (GIS)
WATER CERTIFICATION	MACINTOSH (PLEASE LIST PROGRAMS)
WATER LAB CERTIFICATION	DESKTOP PUBLISHING
WASTE WATER CERTIFICATION	MICROSOFT SERVER
	NETWORK MANAGEMENT
	TYPING AT WPM
EQUIPMENT OPERATION:	PLEASE LIST ANY OTHER SKILLS OR CERTIFICATIONS YOU POSSESS:
JACK HAMMER	
JETTER	
HEAVY/TANK TRUCK	
DOZER	
FRONT END LOADER	
BACKHOE	
TRACTOR WITH ATTACHMENTS	
GRADER	

AGREEMENT:

I certify that answers given herein are true and complete to the best of my knowledge. I understand that any false or misleading information given by me on this application or throughout the selection process could cause me to be ineligible for or terminated from employment. To assist in determining my qualifications and fitness to perform the duties of this position or any position with the City of Bartlesville, I authorize the City of Bartlesville to investigate and verify information obtained through this application and the selection process. I hereby release the City of Bartlesville and its agents from all liability in making such investigations and inquiries. Furthermore, I release my employers, schools, or persons from all liability in responding to inquiries in connection with my application. If after reviewing my application form, verifying my responses, and conducting necessary interview or tests, I am considered for the job and would need reasonable accommodation to perform the essential job functions, the parties will explore these alternatives. Once conditional offer of employment is made, I understand that the City may conduct a medical exam to determine whether I can do the essential functions of the job without substantial risk to myself and the public. I further understand that I am required to abide by all rules and regulations of the City. I understand that this is not a contract for employment. The City of Bartlesville performs post-offer, pre-employment drug testing.

In connection with the City of Bartlesville's consideration of me for employment, I understand that the City of Bartlesville and its agents may conduct investigative inquiries into my background that will include consumer, credit, criminal, driving, personal reference, job reference, DOT drug and alcohol testing history results, and other reports pertaining to me. These reports may include personal conversations with persons possessing knowledge relevant to these categories. These background inquiries will be conducted and reports obtained to provide the City of Bartlesville with information regarding my character, general reputation, personal characteristics, work record and characteristics, skills and abilities, education and training, employment experiences, past job performance, reasons for termination for previous employment and other pertinent information. If hired by the City of Bartlesville, I understand that I must comply with all policies and procedures of the City of Bartlesville.

I understand the above uses and purpose for which the City of Bartlesville may seek this information about me. I understand that I have a right to make a written request within a reasonable period of time to receive complete information about the nature and scope of the investigation. I hereby give my consent to the City of Bartlesville or anyone acting on its behalf obtaining the above stated information.

I authorize any person or entity contacted by the City of Bartlesville or anyone acting on its behalf to furnish the above-stated information, and I release any such person or entity from any and all liability for furnishing such information. I also release the City of Bartlesville from any and all liability for conducting such an investigation.

Signature of Applicant	Date	