

EDUCATION

Level	Name and location of school	Number of years attended	Did you graduate?	Major/Degree
High School				
College				
Trade, Business, or Correspondence School				
Other Formal Training or Certification				

EMPLOYMENT HISTORY

List last employer first. Include US military service. Do not leave any information blank.

Start Date Month/Year	Employer Name	Position Held	Reason for Leaving
End Date Month/Year	Address		
Final/Current Salary	City/State	Supervisor's Name	
	Phone Number		
Start Date Month/Year	Employer Name	Position Held	Reason for Leaving
End Date Month/Year	Address		
Final Salary	City/State	Supervisor's Name	
	Phone Number		
Start Date Month/Year	Employer Name	Position Held	Reason for Leaving
End Date Month/Year	Address		
Final Salary	City/State	Supervisor's Name	
	Phone Number		

REFERENCES

List three persons not related to you, whom you have known for at least one year.

Name	Business	City & Phone Number	Years Acquainted

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated.

Signature _____ Date _____

PERMISSION TO CONTACT REFERENCES

PLEASE NOTE: By signing this form you grant the City of East Moline permission to contact the references and former employers provided in the Application for Employment about dates of employment, salary, as well as, information about job performance. You agree to hold all references harmless for any information they may provide. By consenting to hold references and former employers harmless, you agree not to hold liable any persons or organizations listed in the Application for Employment for the information they provide to the City of East Moline. You also agree to hold the City of East Moline harmless for any actions that may result from the information obtained from references. By consenting to hold the City of East Moline harmless, you agree not to hold liable, any persons or The City of East Moline for any actions regarding your potential employment resulting from the information obtained (or not obtained) from references. Furthermore, understand that any information received from references and/or former employers shall become the exclusive property of the City and thereby considered confidential and not for dissemination to any unauthorized party, including the applicant. This agreement is not designed to supersede any existing laws or legally binding agreements already in existence at the time of this agreement.

By signing below you hereby certify that you have read and understood all of the information written above and grant The City of East Moline permission to contact the references listed in the Application for Employment. By signing you also certify that you understand the ramifications of agreeing to this agreement and consent to all of the stipulations set forth in this agreement.

Print Name _____

Sign Name _____ Date _ _____

By NOT signing above, you hereby certify that you have read and understood all of the information written above and all of the stipulations set forth in this agreement and DO NOT grant The City of East Moline permission to contact the references listed in the Application for Employment. You also understand that by agreeing not to grant the City of East Moline permission to contact references you have limited the amount of information the City of East Moline will be able to obtain about you, therefore placing you at a competitive disadvantage for employment.

VOLUNTARY AFFIRMATIVE ACTION DATA

**CITY OF EAST MOLINE
HUMAN RESOURCES**
915 16TH AVENUE
EAST MOLINE, IL 61244
(309) 752-1584

PLEASE NOTE: Completion of this form is voluntary.

The City of East Moline considers all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disability, or any other similarly protected status. The City of East Moline complies with all applicable laws governing employment policies and does not discriminate on the basis of any unlawful criteria.

TO BE COMPLETED ON A VOLUNTARY BASIS. NOT USED FOR INTERVIEW PURPOSES.

Failure to provide information has absolutely no influence on The City of East Moline's decision to interview or employ an applicant. This survey is not a part of The City of East Moline's Application for Employment and will be filed separately. All information on this survey will be used to satisfy government record keeping, reporting and other regulations relating to Affirmative Action. The City of East Moline appreciates your cooperation in our efforts to document the demographic data provided by the completing of this form.

Date _____ Date of Birth _____

Last Name

First Name

Middle Initial

Position(s) Applied For: _____

Please select one of the following Equal Opportunity Identification Groups:

- American Indian or Alaskan Indian Asian or Pacific Islander Black (not of Hispanic origin)
 Hispanic White

Please select one of the following Equal Opportunity Identification Groups:

- Male Female

Where did you learn about the opening?

- Government Employment Agency Private Employment Agency Current Employer
 Walk-in School Other
 Relative Advertisement - located in: