



**APPLICATION FOR EMPLOYMENT
CITY OF KIMBALL, NEBRASKA**

DATE

EQUAL OPPORTUNITY EMPLOYER

Personnel Information (Please Print)				
NAME	_____	LAST	FIRST	MIDDLE INITIAL
ADDRESS	_____			
	STREET	CITY	STATE	ZIP
TELEPHONE	_____		E-MAIL ADDRESS	

Are you under age 19? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, age _____				
Date available for work _____ Explain _____				

Position Information:
Position(s) applied for _____
Have you previously worked for the City of Kimball? <input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, please give dates/positions _____
Do you have any relatives working for the City of Kimball? <input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, give names, departments, and relationships. _____

EDUCATION/TRAINING				
Please list below education and/or experience relating to position(s) applied for:				
	Name & Location	Did you graduate?	Degree/Diploma?	Courses of Study
High School:	_____	_____	_____	_____
College:	_____	_____	_____	_____
Vocational Training:	_____	_____	_____	_____

Other (include licenses, certificates, etc.):

FOR CITY USE ONLY!
THIS APPLICATION WAS RECEIVED BY: _____
DATE: _____

Revised: February 2017

Are you legally eligible to work in the United States? [] YES [] NO

Explain _____

References: (Other than family or employers)

Name _____ Address & Phone _____

How or what does this person know about you? _____

Name _____ Address & Phone _____

How or what does this person know about you? _____

Name _____ Address & Phone _____

How or what does this person know about you? _____

You May []

Contact my present employer:

You May Not []

Employer _____

Address _____

City _____ State _____ Zip _____

You May []

Check any and all references and I hold them and you harmless for providing information.

You May Not []

All the information listed by me on this application is true and correct to the best of my knowledge. I understand fully that any false and misleading statements may be cause for rejection of my application and/or if employed may be just cause for subsequent dismissal.

I understand that if I am hired, my employment is at-will and I can be terminated according to the provisions of the City of Kimball Employee Handbook.

(Signature)

This application will be kept on file for six months.

**THE CITY OF KIMBALL DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR,
NATIONAL ORIGIN, SEX, RELIGION, AGE, OR DISABILITY
IN EMPLOYMENT OR THE PROVISION OF SERVICES.**

PRE-EMPLOYMENT INFORMATION

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

In compliance with Federal and State Equal Employment Opportunity laws, qualified applicants are considered for employment without regard to race, color, religion, sex, national origin, military status, age, marital status, or the presence of a non-job-related medical condition or handicap.

So that we can comply with Federal/State Equal Opportunity Employment recordkeeping requirements and other legal requirements, please complete this form.

This Pre-Employment Information will be detached and kept in a confidential file separate from the Employment Application, and shall not be used in making any hiring decision or any selection procedure.

Position Applied For: _____ Date: _____

Name: _____
(Last) (First) (Middle) (Maiden)

Address: _____
(Mailing Address) (City) (State) (Zip)

Birth Date: _____ Nearest Age: _____

Race/Ethnic Group: Caucasian Asian/Pacific Islander
 Black American Indian/Alaskan Native
 Hispanic

Sex: Male Female

Are You a Veteran? Yes No Service: From _____ To _____

Are You a Disabled Veteran? Yes No VA Disability Rate: _____%

How were you referred to us? Self Friends Online Employment Agency
 School Employee NE Job Service
 News Other (Please Explain) _____

(Signature)