

SOUTH OGDEN CITY EMPLOYMENT APPLICATION

3950 Adams Avenue, South Ogden, UT 84403
Ogden, UT 84403-1822
Offices: (801) 622-2700
www.southogdencity.com

SOUTH OGDEN CITY IS AN EQUAL OPPORTUNITY EMPLOYER

We appreciate your interest in working at South Ogden City. As an equal opportunity employer, our employment practices are in accordance with the laws that prohibit discrimination due to race, sex, sexual orientation, age, disability, or national origin. This application form was designed for use by persons applying for various types of positions: professional, technical, clerical, and administrative. Please answer only the questions that apply. All information will be treated confidentially (Additional information may be provided by attaching a resume).

PLEASE PRINT OR TYPE

Title of Position Applying for: _____ Date: _____

Wage Desired: \$ _____ Available to work: Evenings Early Mornings Days Weekends

PERSONAL INFORMATION:

Name: _____
Last First Middle

Address: _____
Street Apt No. City State Zip Code

Telephone No: Home: (____) ____ - ____ Work: (____) ____ - ____ Cell: (____) ____ - ____

E-Mail Address: _____

Do you have any relatives working for the City? No Yes - If yes, please list their name _____

Are you a US Citizen? Yes No If naturalized, date of citizenship _____ & country of birth _____

List any other names used _____

Do you have a valid Utah Driver's License? No Yes CDL: No Yes

Have you ever been employed here before? No Yes - If yes, please give date(s) _____

Type of employment desired: Full Time Part Time Temporary Seasonal

Date available for work: _____

As an adult have you ever been convicted of an offense other than for minor traffic? No Yes

If yes, explain: _____

NOTE: If you wish to be considered for Veteran's preference as a veteran, a disabled veteran, or the unmarried widow or widower of a veteran, please submit proper documentation.

EDUCATION AND TRAINING

	Name of School	City and State	Major Subject/Degree	Number of Years Attended/ Years Graduated
High School				
College/University				
College/University				
Trade School/ Special Training				

LICENSES/CERTIFICATIONS – PLEASE ATTACH COPIES OF CERTIFICATIONS

License/Certification	Expiration Date	In Progress	Completion Date

List Awards, scholarships, honors received

EMPLOYMENT HISTORY

This portion of the application must be completed even if a resume is submitted. Starting with the most recent employer, list full and part-time jobs, summer or volunteer work during the last 10 years. Include periods of military service, self-employment, and unemployment. Please leave no unexplained gaps. Attach separate sheet if necessary.

1) Present Employer:	Telephone: (____) _____ - _____
Address:	Employed (MM/YYYY) From: To:
Supervisor's Name: and Title:	Earnings: Start: \$ Last: \$
Job Title:	Reason for Leaving:
Describe your work:	

2) Present Employer:	Telephone: (____) _____ - _____
Address:	Employed (MM/YYYY) From: To:
Supervisor's Name: and Title:	Earnings: Start: \$ Last: \$
Job Title:	Reason for Leaving:
Describe your work:	

3) Present Employer:	Telephone: (____) _____ - _____
Address:	Employed (MM/YYYY) From: To:
Supervisor's Name: and Title:	Earnings: Start: \$ Last: \$
Job Title:	Reason for Leaving:
Describe your work:	

We may contact the employers listed above unless you indicate those you do not want us to contact.	Do not contact Employer Number(s): Reasons:
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References

Name			Employer/Position	Business Address	Business Phone No.
First	M.I.	Last			
					(____) _____ - _____
					(____) _____ - _____
					(____) _____ - _____

Nepotism Agreement

I understand I will not be eligible for appointment, promotion, or transfer to a City Department where a member of my immediate family is employed. (Immediate family is defined as a spouse, parent, sibling, child, grandchild, grandparent, uncle, aunt, niece, nephew, first cousin, half-brother, half-sister, sister-in-law, brother-in-law, mother-in-law, father-in-law, son-in-law, or daughter-in-law.) Seasonal employees may work in the same department, however, they may not be supervised or appointed by a member of the immediate family. Members of the immediate family of City Elected Officials and the Chief Administrative Officer are not eligible for employment with the City. Applicants for employment shall be required to disclose any familial relationships with other employees of the City. It will be grounds for immediate discharge if applicants willfully withhold or give false information.

If I choose to participate in the testing process for police officer or firefighter, my standing on the resulting eligibility list will be considered ineligible until such time that no relative is employed by South Ogden City in the department for which I am applying.

Note: Nepotism practices are governed by current policy and are subject to change dependent on changes in City Policy, State or Federal Law.

Applicant's Statement

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

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I authorize the release of any and all background information concerning me, including information of a confidential or privileged nature not otherwise in conflict with ADA or other similar regulation, to the hiring authorities of South Ogden City. I give South Ogden City the right to contact and obtain information from all references, employers, and educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information. This information is to be used to assist the City in determining my qualifications and fitness for the position I am seeking.

I understand that offers of employment may be conditional upon the successful completion of a criminal background investigation. I also understand that, if I am under 18 years of age, a work permit will be required.

I understand that the employer does not unlawfully discriminate in employment and no question in this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I understand that the post hiring offer process may include a drug screen and that if I fail that drug screen I will not be eligible for employment in any position with South Ogden City for a period of six (6) months from the date of the screening. I understand that I may also be required to submit to a post offer physical examination as may be authorized by applicable law.

I understand that offers of employment may be conditional upon the successful completion of a criminal background investigation. I understand South Ogden City may check my credit report.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date _____