

**CITY OF HAWARDEN  
APPLICATION FOR SEASONAL EMPLOYMENT  
AN EQUAL OPPORTUNITY EMPLOYER**



PLEASE PRINT OR TYPE

Position(s) Applied for \_\_\_\_\_ Date of Application \_\_\_\_\_

**PERSONAL DATA**

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Address \_\_\_\_\_ Drivers License Number \_\_\_\_\_

Do you meet the mandatory minimum age requirement of 16? Yes \_\_\_\_\_ No \_\_\_\_\_

Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Cell Number (\_\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_

Have you ever been employed here before? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, give dates and positions \_\_\_\_\_

Are you eligible for employment in this country? Yes \_\_\_\_\_ No \_\_\_\_\_

Date available for work? \_\_\_\_\_ What is your desired salary range? \_\_\_\_\_

Have you ever been convicted or plead no contest to a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes please provide dates, details, and outcome.

Physical Condition: Excellent \_\_\_\_\_ Fair \_\_\_\_\_ Good \_\_\_\_\_ Poor \_\_\_\_\_

**EDUCATION AND TRAINING**

|               | No. of Years Completed | Dates Attended | Did You Graduate? | Name of School |
|---------------|------------------------|----------------|-------------------|----------------|
| Elementary    |                        |                |                   |                |
| High School   |                        |                |                   |                |
| College       |                        |                |                   |                |
| Post Graduate |                        |                |                   |                |

List any special training (vocational schools, short courses, workshops, etc.) or certifications that you might have: \_\_\_\_\_

If the job announcement requires completion of specific courses or training, indicate that which you have completed: \_\_\_\_\_

If the job announcement requires the operation of specific machinery or special skills, list those at which you are competent: \_\_\_\_\_

**REFERENCES**

List the name, title, and address of three persons with knowledge of your character, experience, and ability. Do not list relatives or former employers.

Name \_\_\_\_\_ Title \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Years Known \_\_\_\_\_

**REFERENCES (CONT'D)**

Address \_\_\_\_\_ Phone \_\_\_\_\_  
Name \_\_\_\_\_ Title \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

**EMPLOYMENT HISTORY**

Begin with your present, or most recent employer, and continue for the past 15 years (if applicable):

Attach additional sheets if necessary.

Name and address of employer \_\_\_\_\_ Phone \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Dates employed \_\_\_\_\_ Position held \_\_\_\_\_  
Description of duties \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Final Salary \_\_\_\_\_ May we contact this employer? Yes \_\_\_\_\_ No \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Name and address of employer \_\_\_\_\_ Phone \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Dates employed \_\_\_\_\_ Position held \_\_\_\_\_  
Description of duties \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Final Salary \_\_\_\_\_ May we contact this employer? Yes \_\_\_\_\_ No \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Name and address of employer \_\_\_\_\_ Phone \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_ Title \_\_\_\_\_  
Dates employed \_\_\_\_\_ Position held \_\_\_\_\_  
Description of duties \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Final Salary \_\_\_\_\_ May we contact this employer? Yes \_\_\_\_\_ No \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**CERTIFICATE OF APPLICANT**

Please read carefully. I hereby certify that this application contains no misrepresentations or falsifications and that the information given me is true and complete to the best of my knowledge and belief. I am aware that should an investigation at anytime disclose any such misrepresentation or falsification, my application will be rejected. I will be dismissed from the service and I will be disqualified from applying in the future with the City of Hawarden. I further authorize the City of Hawarden to make all necessary and appropriate investigations to verify the information contained herein.

I fully understand that by signing this application for employment it authorizes the West Sioux Community School and City of Hawarden to share any and all information relative to my employment with the City of Hawarden including, but not limited to, behavioral and academic information that will be used to periodically monitor my performance and character, knowing that subsequent employment with the City is dependent upon being an excellent student.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_