

City Use ONLY: Date received: _____ Time Received: _____ Rec'd by initials: _____

City of Hubbard, Ohio
Employment Application

Position applied for: _____

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Home phone: _____ Cell phone: _____ Other phone: _____

Driver's License Number: _____ Issue State: _____

Are you a U.S. Citizen or permanent resident alien? Yes _____ No _____

Is there any medical/physical condition that limits your ability to perform work in the position for which you are applying? If yes, explain. (Discrimination on the basis of a handicap, which does not create an occupational hazard nor prevent substantial job performance is prohibited by law) Yes _____ No _____

EDUCATION

High School name and address: _____

Highest grade completed? _____ Graduated? _____ Subjects studied? _____

College name and address: _____

Number of credit hours completed? _____ Subjects studied? _____

Graduate, Trade or Business School name and address: _____

Degrees / Certificates attained? _____

MILITARY

Branch of Service: _____ Military Specialty: _____

Years/Months/Days of Active Duty Service: _____

Highest rank achieved: _____ Military Schools Attended: _____

EMPLOYMENT HISTORY (MOST RECENT FIRST)

Employer: _____

Address: _____

Position held: _____ Last salary: _____ Reason for leaving: _____

Employer: _____

Address: _____

Position held: _____ Last salary: _____ Reason for leaving: _____

Employer: _____

Address: _____

Position held: _____ Last salary: _____ Reason for leaving: _____

PROFESSIONAL & CHARACTER REFERENCES

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

SPECIAL SKILLS

List any skills or qualifications you feel you have to qualify you for this position:

I hereby certify that the above is true and complete and understand that, if employed, falsified statements on this application may be grounds for immediate dismissal and/or prosecution. The companies, schools and persons named above may give information regarding me and my history and I hereby release all entities from liability for providing such information.

Signature: _____ Date: _____

The City of Hubbard, Ohio is an equal opportunity employer