Employment Application



1512 7TH STREET	*	CITY OF CORALVILLE	*	CORALVILLE	. IOWA 52241

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, creed, gender identity, sexual orientation or the presence of a non-job-related medical condition or disability.

(Please print)

Position Applied For		Date of A	pplication	
Last Name	First Name		Middle Initial	
Address	City	State	Zip Code	
Telephone Number(s)	EMAIL			

To facilitate reference checks, please indicate any other name(s) under which you have been employed.

If required to perform the job for which you are applying, do you have a:

valid driver's license ~ Yes ~ No valid chauffeur's license ~ Yes ~ No

If a position requires a valid driver's or chauffeur's license, it will be listed in the Position Vacancy Announcement.

Education

Circle highest grade completed: 6 7 8 9 10 11 H.S. Diploma GED College: 1 2 3 4				
	POST HIGH SCHOOL	L EDUCATION	N	
Dates Attended	Current Major or Degree Attained	Schoo	ol Name a	& Address
Doggribo any gnog	ializad training apprenticeshin s	kille or qualific	rations	you possess which
Describe any specialized training, apprenticeship, skills or qualifications you possess which relate to the job for which you are applying:				
Have you ever been convicted of a felony? Conviction will not necessarily disqualify an applicant from employment.				
If yes, please explain				

Employment Experience

Start with your present or most recent job. Please provide a <u>minimum</u> of 10 years employment history, if possible. (The City considers military service as employment). You may also include job-related volunteer activities. You may exclude organizations which indicate protected status as listed on page one.

1. Employer	Dates Employed	Job Title:	Part Time or Full Time
Address		Work Performed:	
Starting Salary	Current/Ending Salary		
Supervisor	Phone		
May we contact for a refere	ence check? No		
Reason for Leaving or Wan			
2. Employer	Dates Employed	Job Title:	Part Time or Full Time
Address		Work Performed:	
Starting Salary	Current/Ending Salary		
Supervisor	Phone		
May we contact for a refere	ence check? No		
Reason for Leaving or Wan			
		.	
3. Employer	Dates Employed	Job Title:	Part Time or Full Time
Address		Work Performed:	
Starting Salary	Current/Ending Salary		
Supervisor	Phone		
May we contact for a refere	ence check? No		
Reason for Leaving or Wanting to Leave			
4. Employer	Dates Employed	Job Title:	Part Time or Full Time
Address		Work Performed:	
Starting Salary	Current/Ending Salary		
Supervisor	Phone		
May we contact for a refere	ence check? No		
Reason for Leaving or Wanting to Leave			

Additional Employment History

5. Employer Dates Employed		Job Title:
Address		Work Performed:
Starting Salary	Current/Ending Salary	
Supervisor	Phone	
May we contact for a reference Yes	ce check? No	
Reason for Leaving or Wanti	ng to Leave	
6. Employer	Dates Employed	Job Title:
Address		Work Performed:
Starting Salary	Current/Ending Salary	
Supervisor	Phone	
May we contact for a reference Yes	ce check? No	
Reason for Leaving or Wanti	ng to Leave	
7. Employer Dates Employed		Job Title:
Address		Work Performed:
Starting Salary	Current/Ending Salary	
Supervisor Phone		
May we contact for a reference check? Yes No		
Reason for Leaving or Wanting to Leave		

If you have additional employment history, please attach a sheet of paper with the information.

Applicant's Statement

nte any additional information you	u feel may be helpful to us in considering your applicatio
I understand that intentional fals further consideration for employ the City of Coralville to conduct background, work history and	ein are true and complete to the best of my knowledge. se statements on this application will eliminate me from yment or will be grounds for dismissal. I authorize to reparticipate in any investigation of my personal dispolice record as maybe necessary to verify the ployment application and to determine my fitness to hold the d.
	I will be expected to comply with the requirements Control Act of 1986 by providing verification of identity provisions of the Act.
Signature of Applicant	 Date