



**CITY OF SAGINAW
EMPLOYMENT APPLICATION**

Pre-Employment Drug Testing: The City of Saginaw administers pre-employment testing for drug usage. If results are positive, they will be considered in any employment decision and may result in a rejection for employment.

1. **INSTRUCTIONS:** Please type or print neatly using black or blue ink. Answer all questions. Use a separate sheet of paper for additional information or explanations. All statements are subject to investigation and verification.

2. **TITLE OF POSITION APPLIED FOR:**

3. **SOCIAL SECURITY NUMBER:**

4. **NAME:**

First

Middle

Last

5. **ADDRESS:**

Street Number

Street Name

City

State

Zip

6. **TELEPHONE:**

ALTERNATE TELEPHONE:

7. **EMAIL ADDRESS:**

8. Have you ever served in the United States Armed Forces? Yes ___ No ___ Branch _____
If yes, what type of discharge did you receive? Honorable ___ Dishonorable ___ General ___ Other _____

9. Are you a citizen of the United States? Yes ___ No ___

10. Have you ever been convicted of a felony or misdemeanor, including traffic convictions? Yes ___ No ___ Are there any felony charges pending against you? Yes ___ No ___ If yes for either question, list the place, date and details in Section 18 of this application. A conviction will not necessarily be a bar to employment. The nature and circumstances of the offense will be considered in any employment-related decisions.

11. Have you ever been fired or forced to resign from a position? Yes ___ No ___
If yes, give the date, where you worked, and an explanation in the block reserved for comments. (See Section 18)

12. Do you have any relatives currently employed by the City? Yes ___ No ___ If yes, give their names and your relationship to them:

13. Have you ever been employed by the City? Yes ___ No ___
If yes, give the dates, position(s) held and the name you used, if other than your present name.

14. **EDUCATION :** Indicate highest level of education completed: less than 9 9 10 11 12 13 14 15 16 17 18 Higher

School	Name and Location (City, State)	Major Courses	Did you graduate?
High School			
Business			
College			
Post Graduate			

15. List any special courses you have taken:

16. EMPLOYMENT RECORD: Give a complete record of your employment or business activities for at least the past ten (10) years. Indicate any experience you have had which is applicable to the type of work for which you are applying. **BEGIN WITH YOUR MOST RECENT EMPLOYER ON THE TOP LINE.**

<u>Dates</u> From	To	Title of Position	Starting Salary	Ending Salary
Name of Company		Duties		
Address (City, State)				
Name of Supervisor				
<u>Dates</u> From	To	Title of Position	Starting Salary	Ending Salary
Name of Company		Duties		
Address (City, State)				
Name of Supervisor				
<u>Dates</u> From	To	Title of Position	Starting Salary	Ending Salary
Name of Company		Duties		
Address (City, State)				
Name of Supervisor				
<u>Dates</u> From	To	Title of Position	Starting Salary	Ending Salary
Name of Company		Duties		
Address (City, State)				
Name of Supervisor				

17. Other skills/talents/interests:

18. Comments and Explanations:

I hereby authorize the City of Saginaw to obtain from my former employers all data needed to support this application. I certify the information given by me is true and complete to the best of my knowledge and belief. I understand that any falsification of material facts will be grounds for rejection of this application or dismissal after employment.

Date

Signature



2/18/2013

CITY OF SAGINAW APPLICANT DATA CARD

The City of Saginaw is an Equal Opportunity Employer. This confidential Applicant Data Card is intended to help us collect information required as part of the City's Equal Employment Opportunity Program. Under State and Federal law, it may not be used to discriminate against you. Information is used only for statistical reporting purposes. All responses are completely voluntary. Refusal to respond will not result in adverse treatment of any applicant. Please return this card to the Office of Employee Services with your Employment Application.

Title of Position Applied For: _____ **Date:** _____

Race: White _____
Black/African American _____
Hispanic/Latino _____
Amer. Indian/Alaska Native _____
Asian _____
Native Hawaiian or
other Pacific Islander _____
Multiracial _____

Sex: Male _____
Female _____

Birth Date: ____/____/____

How You Learned of Job Opening:
Ad (newspaper or publication) _____
Job Announcement Flyer _____
Job Information Phone Line _____
SGTV Cable TV _____
Word of Mouth _____
Internet/Computer _____
Other _____

Are you a U.S. Veteran? Yes _____ No _____ If yes, give dates of enlistment: _____

Do you have any disabilities or physical limitations in performing any job-related functions for which accommodations should be made?
Yes _____ No _____ If yes, please explain: _____
