### **EMPLOYMENT APPLICATION**

## City of Walton, KY

APPLIC	CANT I	NFOR	OITAM	<b>V</b>														
Last Name						First					M.I.		Date					
Street Address													Apartm	nent/Un	it#			
City							State					ZIP						
Phone							E-mail /	Address										
Date Available Socia					Social Se	Security No.			Des			sired Salary						
Position Applied for																		
Are you a citizen of the United States? YES					NO		If no, are you authorized to work in the U.S.? YES NO											
Have you ever worked for this company? YES					YES 🗆	NO		If so, when?										
YES I					YES 🗌	NO		If yes, explain										
EDUCA	TION																	
High Sch	ool					Add	dress											
From		То	To Did you graduate?		YES	s 🗆	NO 🗆	D Degree										
College	lege																	
From		To Did you grade			graduate?	YES	5 🗆	NO Degree										
Other							dress											
From		To Did you gradu		graduate?	YES	s 🗆	NO   Degree											
					Tre say			-										
REFERENCES																		
Please list three professional references.																		
Full Nam	Name								Relat	ion	ship							
Company									Phon	е								
Address																		
Full Name								Relationship										
Company							n 45		Phon	e								
Address																		
Full Name							3		Relat	ion	ship							
Company								A STATE	Phon	е		8.0						
Address													K					

PREVIOUS EMPLOYMENT											
Company		Phone									
Address		Supervisor									
Job Title		Starting Salary	\$	у \$							
Responsibilities											
From To	Reason for Leaving										
May we contact your previous super	visor for a reference?	NO 🗆									
Company		Phone									
Address		Supervisor									
Job Title	Starting Salary	\$		y \$							
Responsibilities		1									
From To	Reason for Leaving										
May we contact your previous supervisor for a reference? YES NO											
Company		Phone									
Address		Supervisor									
Job Title		Starting Salary	\$		Ending Salar	у \$					
Responsibilities					-						
From To	To Reason for Leaving										
May we contact your previous superv	visor for a reference?	YES 🗆	№ □								
MILITARY SERVICE			4 (1)								
Branch			From	To	)						
Rank at Discharge		Type of Discharge									
If other than honorable, explain											
DISCLAIMER AND SIGNATUR	E										
I certify that my answers are true and		est of my knowled	ne.								
If this application leads to employme may result in my release.				in my a	application or i	interview					
Signature		Date									

Equal Employment Opportunity: We offer equal employment opportunities to all persons without regard to race, color, religion, age, marital or veteran's status, sex, national origin, disability, or any other legally protected status.

#### **AGREEMENT**

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

You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice. I understand that I have the right to make a written request within a reasonable period of time to receive detailed information about the nature and scope of any investigative report that is made.

I understand that I am making application only for the current vacancy and that I must reapply for any subsequent vacancies.

If I were to be offered employment or in my being considered for employment by the City of Walton, I agree to conform to the rules and regulations of the City of Walton and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by the City of Walton at any time, at the City of Walton's sole option and without any prior notice to me.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the City of Walton and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the City of Walton unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that the City of Walton retains the same right.

Should I be offered employment I understand that I may be required to submit to a physical examination which may include a drug screen and that my employment will be conditional upon the results of said physical examination and drug screen.

In the event of employment, I understand that false or misleading information given in, my application or interview(s) may result in discharge.

GNATURE OF APPLICANT					DATE
Arrange In	terview	Yes	☐ No		
Remarks _					(4.7
				INTERVIE	WER DATE
Employed	□Yes	□No	Date of Empl	oyment	
			Hourly Rate/		
Job Title _				Department	
	Ву		NAME AND TITLE		DATE
	die e		NAME AND TITLE		DATE
OTES				=	
7 54				W. T.	
		en Maria	3 7		

### ATTACHMENT II

# PRE-EMPLOYMENT TESTING NOTICE TO APPLICANTS FOR NON-SAFETY AND SAFETY SENSITIVE POSITIONS

YOUR APPLICATION WILL BE CONSIDERED INCOMPLETE IF THIS NOTICE IS NOT SIGNED AND DATED!

I am hereby acknowledging the aware that employees will not MRO.	at I will be given pre-employment drug tests. I am be hired without a clear negative test from the
WIKO.	
Signed: Name	Date