### **Application For Employment**

We consider applicants for all positions without regard to race, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status

# COMPLETE <u>ALL</u> SECTIONS AND <u>EACH</u> QUESTION COMPLETELY AND ACCURATELY

## City of Mansfield, Ohio

#### **MISSION STATEMENT**

We are a team dedicated to providing the highest quality of professional service to positively impact the citizens

Position Applied For:		Date of Application	on
How Did You Learn About Us?	(Check One)	I .	
<ul><li>□ Advertisement</li><li>□ Jobs and Family Services</li></ul>	☐ Friend/Relative☐ City's Web Site	☐ City Employee: ☐ Other:	
Last Name	First Name	M	iddle Name
Address: Number & Street	City	State	Zip Code
Telephone Number(s)		Social Security	Number
Have you ever filed an application	with us before?		☐ Yes ☐ No
If yes, give date(s)			
Have you ever been employed by			□ Yes □ No
Do any of your friends or relative	fice(s) and date(s)s s work for the City of Mansfie Name		□ Yes □ No
If yes, please list name and relationship:			
Are you currently employed?			□ Yes □ No
If yes, may we contact you	ır current employer?		□ Yes □ No
Are you prevented from being law or immigration status? (Proof of c			□ Yes □ No
Are you currently on "lay-off" and	subject to recall?		□ Yes □ No
Date available for work//_	Are you available to work	: □Full-Time □ Part-Time	Temporary

<b>EDUCATIO</b>	N					
	Name and A of Scho		Course of Study		Years Completed	Diploma/ Degree
High School						
College						
Graduate School						
Other (specify)						
· -		-	ps, skills, and extra			es, includ-
ADDITION	AL INFORI	MATIO	N			
			in or possess any of	f the fol	llowing:	
□ Microsoft O	ffice Applications	□ Dispate	hing 🗆 (	Ohio Pe	eace Officer (	Cert.
□ Excel/Sprea	adsheets	□ Dump t		•	Check all he	•
□ Data entry □ Keyboard _	WPM	☐ Back ho☐ Front lo		☐ Clas	ss B □Cl ker Endorse:	ass A ment
Other Qualification	one: Summoriae (	other specie	l skills and qualifica	otions r	7011 <b>D</b> 0000000	which are
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### **EMPLOYMENT EXPERIENCE**

Start with your current or most recent job. Attach additional pages if necessary. *All sections must be completed*.

Employer		Dates E	mployed	Work Performed
		From	То	WOIK I CHOILICU
Address				
Telephone Number		Hourly R	ate/Salary	
		Starting	Ending	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates En	mployed	WIDCI
		From	То	Work Performed
Address				
Telephone Number		Hourly R	ate/Salary	
		Starting	Ending	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Er	mployed	Work Performed
		From	То	
Address				
Telephone Number		Hourly Ra	ate/Salary	
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Job Title	Supervisor			
Reason for Leaving	1			
Employer		Dates En	nployed	Work Performed
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Address				
Telephone Number		Hourly Ra	ite/Salary	
		Starting	Ending	
Job Title	Supervisor			
Reason for Leaving	•			
				•

# REFERENCES (persons not related to you)

1			
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	(Name)	(Address)	(Phone Number)
3			
2	(Name)	(Address)	(Phone Number)
	(Ivallic)	(riddress)	(Filone Number)
3			
	(Name)	(Address)	(Phone Number)
1	(37		
	(Name)	(Address)	(Phone Number)
NPL	ICANT'S S	TATEMENTS	
READ F	EACH STATEME	NT BELOW AND INITIAL	EACH STATEMENT WHICH YOU
		REE TO ACCEPT:	
1. B	y my signature bel	low, I certify that all answers	s given in this application are true and
			s given in this application are true and application is found to be false or inten-
complete	e. I understand th	at if any information in this	s given in this application are true and application is found to be false or inten- further consideration, or if already em-
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