

PRESTONSBURG CITY'S UTILITIES COMMISSION

APPLICATION FOR FULLTIME EMPLOYMENT

Prestonsburg City's Utilities Commission is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications and Without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation

PLEASE TYPE OR PRINT. Complete the entire application.
You may attach a resume, but you must still complete all questions.

Name (Last, First, Middle):			
Street Address:		City, State & Zip:	
Social Security Number:	Home Phone:	Work Phone:	Other Phone:
Are you eligible to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If NO, what is your current age?	
Position Applying For:		Salary Desired:	
Date You Can Start:	Are You Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If So May We Inquire Of Your Present Employer <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever applied to this company before?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, List when:	
If required for position, do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, State of Issuance, and Drivers License Number:	
Referred by:			

EDUCATION

Name of School	City/State	Did you graduate?	If Yes, date of Graduation	Degree received
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other School:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No		

SKILLS: Please list technical skills, clerical skills, trade skills, etc., relevant to this position.

WORK EXPERIENCE- Please detail your work history. Begin with your current or most recent employer.

Dates Employed (most recent position) <i>From:</i> <i>To</i>	Name & Address of Employer:	Position:
Salary:	Reason For Leaving:	
Dates Employed (most recent position) <i>From:</i> <i>To</i>	Name & Address of Employer:	Position:
Salary:	Reason For Leaving:	
Dates Employed (most recent position) <i>From:</i> <i>To</i>	Name & Address of Employer:	Position:
Salary:	Reason For Leaving:	

REFERENCES GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU

NAME	ADDRESS AND PHONE	BUSINESS	YEARS KNOWN

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete.

I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration

for employment, or termination after employment if discovered at a later date.

I authorize **Prestonsburg City's Utilities Commission** to investigate, without liability, all statements contained in this application and supporting materials.

I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment.

If requested, I agree to submit to a physical exam, and criminal background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff Employees of **Prestonsburg City's Utilities Commission** serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law.

If employed, I will be required to furnish proof of eligibility to work in the United States, and to comply with company and Departmental regulations.

Applicant Signature: _____

Date: _____