

CITY OF AURORA PART-TIME JOB APPLICATION

PLEASE NOTE: It is important that you complete all parts of the application. If your application is incomplete or does not clearly show the experience and/or training required, your application may not be accepted. If you have no information to enter in a section, please write N/A.

Name and Address								
Name (First, MI, Last)								
Mailing Address								
City, State, and Zip Code								
Telephone				Alternate Phone				
If under 18, please list age				Email				
Job Type								
Days/hours available to work								
I have no preference.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.	
I am seeking a:		Full-time job		Part-time job		Full- or Part-time		
How many hours can you work weekly?				Can you work nights?		Date available to begin		
Additional Information								
Have you ever been employed by this organization in the past?						Yes	No	
I certify that I am a U.S. citizen, permanent resident, or a foreign national with authorization to work in the United States.						Yes	No	
Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld judgment to a felony?						Yes	No	
If Yes, please explain:								
Do you have a driver's license?			Yes		No		Driver's license number	
						Issued in what state?		
Have you had any accidents during the past three years?						How many?		
Have you had any moving violations during the past three years?						How many?		

Education				
School	Location (mailing address)	Years Completed	Major	Degree or Diploma
High School				
College or Business/Trade School				
Military				
Have you ever been in the Armed Forces?	Yes	No	Date entered	
Are you now a member of the National Guard?	Yes	No	Discharge date	
Specialty				

Work Experience

Please list ALL work experience beginning with your most recent job held. Attach additional sheets if necessary.

Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone number	Your last job title	
Reason for leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer? Yes No		
Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone number	Your last job title	
Reason for leaving (be specific)		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.		
May we contact this employer? Yes No		

Work Experience (continued)

Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone number	Your last job title	

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact this employer? Yes No

References

Please include name, phone number, and circumstances of your acquaintance. Exclude relatives and former employers.

1.

2.

3.

4.

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that, should this application contain any false or misleading information, my application may be rejected or my employment with this company terminated.

Signature

Date

Applicant's Signature _____

Date _____

AUTHORIZATION PERMIT FOR POLICE BACKGROUND INVESTIGATION

I hereby authorize the _____ Police Department to give any information concerning any arrest record that I may have on file, and in signing this authorization, I hereby release the above law enforcement department of any right, claims, or demands that I may have against them.

Name _____

Address _____

Date of Birth _____

Social Security Number _____

Signature _____

(Signature of Law Enforcement Official)

(Title)

(Date)

(ATTENTION EMPLOYERS: The only records check by this department are the Criminal and Traffic Records of the Aurora Police Department)

Does the Applicant have a record on file: _____ Yes _____ No

Date _____ Charge _____ Court _____ Disposition _____