EMPLOYMENT APPLICATION City of Shelbyville



Please be detailed with your job descriptions and skills used on the job.

Read all instructions. Sign and date page 8.

City of Shelbyville Employment Application Instructions

Many applicants either have their applications rejected or their scores affected by application errors that may be avoided. The following information is an effort to help you avoid the most common mistakes. <u>Please read these instructions carefully before submitting your employment application</u>. Any misrepresentation in this application and/or attachments WILL cause your application to be rejected, your name to be removed from the eligible register and/or subject you to dismissal.

> GENERAL INFORMATION

- Please read the minimum requirements (and application notes if the job is posted) before applying.
- Apply for positions <u>only</u> if you meet the minimum qualifications for the job. We cannot waive requirements.
- Type or print applications in blue or black ink.
- Application materials must be received by the announced deadline.
- Remember to sign and date your application and submit your driver's license and SS Card.
- City of Shelbyville applicants should provide accurate and complete application information regarding employment, education, criminal history, etc.
- Criminal record checks will be run on all applicants not currently employed with the City of Shelbyville, as well as those
 employees with less than six months of service. These record checks will be run prior to candidates being eligible for
 interview.
- The following information is required for criminal record checks to be run: Soc. Sec. No., birth date, driver's license and state in which it was issued, city and state for each employer.
- Applications written in pencil or copies that are too light or damaged (bent, rolled, stained, etc.) are not acceptable.
- Once submitted, your application and attachments will not be returned, reused or copied for you.

> EDUCATION RELATED INFORMATION

Educational requirements are met only through accredited institutions. The institutions must be accredited by an agency recognized by the United States Department of Education. Foreign degrees must be converted.

In order for education to be credited, **copies of education, certification, and similar documents are required with employment applications.** It is best to provide transcripts in case specific courses are needed. It is also beneficial to bring certificates and diplomas for short courses completed, such as software, leadership courses, etc.

Not submitting copies of education, certification and similar documents at the time of admittance will result in your name not being certified if the appointing authority specifically requests a degree or certification. As you renew licenses and certifications, please bring in your new documents for us to copy.

If your college diploma does not specify what your major field of study was, please submit a transcript. Education credits may be awarded, in many cases, only if the specific degree is indicated.

It is best to include all levels of higher education documentation because credit may be given for a specific bachelor's degree that would not be evident on a master's diploma.

Even if you did not complete college, it is still beneficial to submit a transcript of completed courses because partial credit may be awarded. If you are applying for a position that requires a college degree and you either did not complete college, or completed but not in the required field, you must list your major undergraduate subjects and credit hours to be considered for admitting

EMPLOYMENT RELATED

Work history is used to determine whether you qualify for the job for which you are applying. Please complete each area of employment history. *Do not write "See Resume"*.

List all periods of employment, beginning with your present or most recent employer and working back.

Title of position held should be your official title and not a working title or multiple titles.

It is especially important that you fill out the beginning and ending dates (month/year) and the average number of hours worked per week for each job listed. If the hours varied, list a range such as "5-15" hours, or "20-40" hours. If you often worked overtime, "40+" is acceptable in the hour's box.

If you held different jobs while working for the same employer (e.g. promotions), treat each change as a separate job using separate blocks and giving specific information for each change.

Also, describe in detail the specific duties beginning with your primary duties. Job descriptions should include types of software used, specific equipment operated, customer service specifics and other such details. Preprinted job descriptions are not accepted in place of description of duties on the application form since they do not necessarily reflect your particular position.

Where you have held supervisory positions, titles of people supervised, not just the number of people, should be indicated in the "number and job title of employees you supervised" box.

Check your starting and ending dates for feasibility. Look for errors such as employed from 2/6/87-1/4/82 or a date of 14/2/93, or 6/8/19.

Please do not use abbreviations, initials or military jargon when describing your duties or listing your job title.

Include specific details such as software used, equipment operated, types of records maintained, etc.

If you cannot fit all the jobs you have held on this application form, make a copy of any blank employment history page.

> APPLICATION SUPPLEMENTS

For heavy Equipment Operator and Maintenance Worker applications, equipment lists must list employers and should be consistent with the employment history on your employment application. If a position requires a license or certification you must have an up-to-date license/certification (e.g. driver's license, EMT, CDL) on file with the Human Resources Department to be considered for employment in that position.

Thank you for your interest in City of Shelbyville employment and good luck in your employment search.



City of Shelbyville Application for Employment 315 Washington Street, Shelbyville, KY 40065 Phone: (502) 633-8000/Fax (502) 633-4292 Web Address: www.shelbyvillekentucky.com EEO/ADA Employer

*** Please read employment application instructions before completing this form***

Position for which you are applying:					,		Internal/Previous Employees only: ☐Re-employ☐	
Check all that you may b	e interested in: Full-tir	ne	☐ Part-time ☐]	•			
Last Name			First Name			Midd	le Initial	
Mailing Address		City	State		Zip Code			
Cell Telephone No.	Home Telephone No.		Minimum Salary	Requirement	Address			
Driver's License #	State	E	xpiration Date	☐ Operators(Privat	te Vehicle) Licen	se Class	
				CDL (Present License for 1	HR Copy)	Endorsement ———		
Have you ever been conv Complete the following: considered on its individu Nature of Offense	☐ Ye	s 🗆 No						
Are any of your education	(Inaccurate information here will result in disqualification.)							
records found under a di	Yes	☐ No						
Are you currently employed by City of Shelbyville? If yes please give: *Department/Division*							s 🗆 No	
Are you a former employ Last Date(s) o	∐Yes	□ No						
Have you ever been disclemployer, date and reaso	□Yes	□ No						

Do you have any relatives working for the City of Shelbyville? Yes No If yes, please list their names below (Please use separate page if necessary):									
Name:	200 page								
Name:									
Name:									
Analysis and having data would in the United Ctates 2	Vac - Na Fannan sitiana a annu afunum suth asiantian								
· —	Yes No For non-citizens, a copy of your authorization tion Service must be submitted along with the application								
REFERENCES:									
Name:	Phone No.:								
Name:	Phone No.:								
Name:	Phone No.:								
Branch of U.S. Military Service	Dates Served (Month/Year) to (Month/Year)								
Highest Rank Attained	Military Occupation Specialty								
Major Duties :	Honorable Discharge								
	☐ Yes ☐ No								
Comments:									
For Office Use Only:									
Date Received: Time Received	:								
Accepted by:									

			ATION AND							
	Did y	ou grac	AND HIGH luate from Hig		Name	and Locatio	n of Last Scho	ol Attended		
Highest Grade Completed (choose one) \square 7 \square 8 \square 9 \square 10 \square 11 \square 12	obtai	n a GEI) ?			(High School, Junior High) Name:				
		HS	GED		Locati	Location:				
Related Special Training(Correspond	lence, Bu	siness,	Trades, Voca	tional, Arme	ed Forces	Schools, Et	tcprovide cop	y of doc's)		
Names and Locations of School		Attende & Yr)		Subjects Con	nlatad	Credit	Diplomas/C	Certificates		
ivallies and Locations of School	From	To	Courses/	Subjects Con	ipieteu	Hours	Recei	ved		
COLLEGES AND UN										
** Must be from a recognize				-			ppiication**			
Names and Locations of School(s)	Dates Attended (Mo & Yr)		Credit Hours		Degree <u>Earned</u> (e.g. BA/BS)		Major	Minor		
	From	То	Semester O	R Quarter	List IF	completed				
Major <u>Undergraduate</u>		Credit 1	Hours		jor <u>Grad</u>		Credit Hours			
College Subjects	Semester	r OR	Quarter	Col	llege Sub	ects	Semester O	R Quarter		
RELAT	ED LIC	ENSES	(provide copy	of licenses)						
Professional License Issued By	Field/Ti	rade spe	ecialization	Lice	nse Numl	per	Issue Date	Expiration Date		

		EMI	PLOYME	NT HISTORY	
May we co	ontact your present en	nployer? YES	NO 🗆	Comment:	
1	Starting Date Month/day/year	Ending Date Month/day/year	Employer	/Company Name and addre	ess (city and state are required)
Hourly rat	e or Salary paid	Hours per Week	Name and	Title of Supervisor	Telephone Number
Reason for	Leaving		<u>. I</u>		
Title of Po	sition Held			Number & Job Title of En	nployees you Supervised
Describe j	ob responsibilities in o	order of importance	:	1	
2	Starting Date Month/day/year	Ending Date Month/day/year	Employer	/Company Name and addre	ss (city and state are required)
Hourly rat	e or Salary paid	Hours per Week	Name and	Title of Supervisor	Telephone Number
Reason for	Leaving				
Title of Po	sition Held			Number & Job Title of En	nployees you Supervised
Describe j	ob responsibilities in o	order of importance	:	1	

3	Starting Date Month/day/year	Ending Date Month/day/year	Employer/Company Name and address (city and state are required)						
Hourly rat	e or Salary paid	Hours per Week	Name and	Title of Supervisor	Telephone Number				
Reason for	Leaving								
Title of Po	sition Held			Number & Job Title of l	Employees you Supervised				
Describe jo	ob responsibilities in	order of importance	:						
	1								
4	Starting Date Month/day/year	Ending Date Month/day/year	Employer	Company Name and add	dress (city and state are required)				
Hourly rate	e or Salary paid	Hours per Week	Name and	Title of Supervisor	Telephone Number				
Reason for	Leaving	•							
Title of Po	sition Held			Number & Job Title of l	Employees you Supervised				
Describe jo	ob responsibilities in	order of importance	:						

5	Starting Date Month/day/year	Ending Date Month/day/year	Employer	Employer/Company Name and address (city and state are required)						
Hourly rat	e or Salary paid	Hours per Week	Name and	Title of Supervisor	Telephone Number					
Reason for	r Leaving									
Title of Po	osition Held			Number & Job Title of	Employees you Supervised					
Describe j	ob responsibilities in	order of importance	:: ::							
6	Starting Date Month/day/year	Ending Date Month/day/year	Employer	/Company Name and ad	dress (city and state are required)					
Hourly rat	e or Salary paid	Hours per Week	Name and	Title of Supervisor	Telephone Number					
Reason for	r Leaving		<u> </u>							
Title of Po	osition Held			Number & Job Title of	Employees you Supervised					
Describe j	ob responsibilities in	order of importance	:							

7	Starting Date Month/day/year	Ending Date Month/day/year	Employer/Company Name and address (city and state are required)					
Hourly rate	e or Salary paid	Hours per Week	Name and Title of Supervisor	Telephone Number				
Reason for	Leaving			l .				
Title of Po	sition Held		Number & Job Title of	Employees you Supervised				
Describe j	ob responsibilities in	n order of importance	:					

CONDITIONS OF EMPLOYMENT STATEMENT

Under penalties of perjury, I declare that my answers to the questions on this application and any necessary examinations and supplements are true and give the City of Shelbyville the right to investigate all information given and to secure additional appropriate information if necessary. I understand that an investigative report may be made from information obtained through personal interviews with others. I understand that this inquiry may include information as to my personal characteristics, employment verification, credential verification, personal identity verifications, reference checks, criminal records, motor vehicle records, and appropriateness for employment. In accordance with the law and my understanding of this statement, I authorize my current and former employers to give any information regarding my employment, together with all information regarding me, and hereby release from all liability or responsibility all persons, companies, or corporations furnishing such information in good faith. I also authorize the release of my scholastic ratings to the City of Shelbyville by schools and other education institutions that I have attended.

I understand that the completion of this application does not assure me of a position with the City of Shelbyville and does not obligate the City of Shelbyville to me in any way. I further understand that any misrepresentation herein WILL cause my application to be rejected, my name to be removed from the eligible register and/or subject me to dismissal. Candidates selected for hire must pass a physical and drug screen prior to employment. I am aware that the results will be made available to the Human Resources Director or a duly authorized representative. The City of Shelbyville is committed to a drug free work place to protect the safety of workers and the public and will comply with the Federal Drug Free Work Place Act.

I understand that this application, exam documents and attachments become a part of the City of Shelbyville records and will not be returned, reused or copied for me once submitted.

Please read the minimum requirements (and application notes if the job is posted) before applying.

By my signature, I certify, authorize and acknowledge the above statements.								
Signature	Date	Social Security Number						

Reminder: With your application, bring copies of transcripts, training certificates, licenses & certificates (e.g. driver's license) and other documents as indicated in the application instructions. If a certification or license is renewed after submission of this application, please bring in your current document for us to copy. An expired credential may result in you not being considered for a vacancy.

					APPLI	CAN	NT D.	ATA					
	our recru	iitment e	efforts	s are reaching all								ormation will be used to EO reporting requirem	
Last Name				First I	Name	e		Middle Initial					
Social Security Number (required)			Date of Birth (Req'd)	Month		Date		Year		Female Male	; <u> </u>		
Ethnic Origin	ı						•		Ra	ice	•		
Hispanic or	or				ın/ Alas	n/ Alaskan Native Native Hawaiian o				ian or	other Pacific Islander		
Latino	Latino Non-Latino			Asian [Black				White		
			Plea	ase indicate how	you lea	arne	d abor	ut this	job	(check on	ne):		
Media			Job	Posting		Organizations						Other	
The Sentinel-	News		City	Web Site			High	school	1			I'm a city employee	
Trades Journa Which one				ekly job announce				ational/ hich or		de School		Referred by City employee	
Radio Which stati	ion?			tinuous recruitme bulletin board	ent list		Colle W		ne?			Walk-in	
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Other:					_		Othe	er;		_			- —