



A Great Place to Grow...

910 South Main Street • PO Box 265 • Yuma CO 80759
www.yumacolorado.org

APPLICATION FOR EMPLOYMENT – Applications ONLY accepted for current job openings.
PLEASE PRINT CLEARLY

POSITION APPLYING FOR: _____

PERSONAL & BACKGROUND INFORMATION:

NAME: _____
Last First Middle Initial

PRESENT ADDRESS:

No. Street City State Zip

PREVIOUS ADDRESS: *If less than a year in current address.*

No. Street City State Zip

PHONE NUMBER: (Home) _____ (Cell) _____

EMAIL: _____

DRIVER'S LICENSE: _____
State Number Type

DATE OF BIRTH: _____

Can you legally work in the United States? _____

Have you ever been employed by the City of Yuma before? Yes No
If yes, please list your title, department, and dates you served.

Do you have any relatives employed by the City of Yuma? Yes No
If yes, please list who and name the type of relationship (e.g. brother, spouse, etc.)

Have you ever been convicted or plead guilty to any misdemeanor or felony violation (with the exception of a minor traffic violation)?

Yes No

NOTE: An affirmative answer to this question will not necessarily disqualify you from employment.

If yes, list, including type and date of conviction(s): Attach additional paper if necessary.

EDUCATION & SKILLS:

SCHOOL	NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS ATTENDED	DIPLOMA OR DEGREE
HIGH SCHOOL				
COLLEGE				
OTHER (SPECIFY)				

Are you bilingual? Yes No If yes, in what language(s)? _____

List the office equipment that you are proficient using.

List the computer software that you are proficient using.

Describe any special skills, training, or job experience that will assist you in the performance of this job. Please include any relevant *certifications* or *professional licenses*.

If you are an experienced operator of heavy equipment, please list the type of equipment.

WORK HISTORY: List below all present and past employment, beginning with your most recent.
Include at least past 5 years. Provide additional paper if needed.

Name & Address of Company and Type of Business	Dates of Employment <i>From – To (Mo/Yr)</i>	Work Description	Reason for Leaving	Name & Number of Supervisor

May we contact the employers listed above? _____ If not, indicate which one(s) you do not wish the City to contact:

PERSONAL REFERENCES: NO FORMER EMPLOYERS OR RELATIVES

NAME & OCCUPATION	ADDRESS	PHONE NUMBER

APPLICANT'S STATEMENT:

I certify that the answers given by me to the forgoing questions and statements are true and correct without omissions of any kind whatsoever. I agree that the city shall not be liable in any respect if my employment is terminated because of false statements, answers, or omissions made by me in this application. I also authorize the companies, schools, or persons named above to give any information regarding my employment, character, and qualifications. I hereby release said companies, schools, or persons from all liability for any damage for issuing this information. I understand that any misleading or incorrect statements may render this application void, and if employed, would be cause for termination. I understand that if employed, I have been hired at the will of the employer and that my employment may be terminated at will, at any time, and with or without cause, the city's only obligation being to pay salary or wages due and owing at the time of the termination. I authorize the City of Yuma to administer a pre-employment background check and acknowledge I will be subject to a pre-employment Drug and Alcohol test prior to employment with the City of Yuma.

Signature

Date

CITY OF YUMA
BACKGROUND INQUIRY AND DRIVER RECORDS CONSENT AND RELEASE

In connection with my application to be an employee with the City of Yuma, Colorado, I understand that investigative inquiries on my criminal background and driver records are to be made on me.

I understand that the City and/or its agents may make inquiries into my criminal history and driving records. Furthermore, I understand that the City and/or its agents may request information from various federal, state and other agencies that maintain records concerning my criminal history and driving records.

I authorize without reservation, any party (including, but not limited to, employers, law enforcement agencies, state agencies, institutions and private information bureaus or repositories) contacted by the City and/or its agents to furnish any or all of the above-mentioned information. In addition, I hereby release the City and its agents from any and all liability for damages arising from the investigation and disclosure of the requested information. I further release and discharge all liability from all companies, agencies, officials, officers, employees and other persons, who, in good faith, provide to this employer and/or its agents the above-mentioned information as requested, in order to successfully complete a background investigation for my application to be an employee. I will allow a photocopy of this authorization to be as valid as the original.

I further authorize the disclosure of any and all sustained findings of knowing misrepresentations, including any knowing misrepresentations in any testimony or affidavit relating to an arrest or prosecution related to my conduct.

PRINT FULL NAME: _____

SOCIAL SECURITY #: _____

DATE OF BIRTH*: _____

DRIVER'S LICENSE: STATE: _____ NUMBER: _____

CURRENT ADDRESS: _____

CITY/STATE/ZIP: _____

PREVIOUS ADDRESS (ES) DURING THE PAST 5 YEARS:

APPLICANT'S SIGNATURE: _____

If potential Employee is under the age of 18, a parent must also sign this form.

Parent-Print Name: _____

Parent's Signature: _____