

## City of Kingfisher 301 N. Main St.

Kingfisher, OK 73750

## **Employment Application**

		Applicant Ir	nforma	ition							
Full Name:	Last First			Date:							
Address:	Street Address					Apartment/Unit #					
	City				State	ZIP Code					
Phone:		E	mail			_					
Date Availab	ole: Do y	you have a valid drive	rs licen	se?.:	Desire	ed Salary:\$					
Position App	olied for:										
Are you a cit	tizen of the United States?	YES NO	If no, a	re you	authorized to	YES NO work in the U.S.?					
Have you ev	er worked for the City?	YES NO	If yes, v	vhen?_							
YES NO Have you ever been convicted of a felony?   Are you related to any City employee or Elected Official?											
If yes, explain:											
		Educa	ation								
High School	:	Address:_									
From:	To:	Did you graduate?	YES	NO	Diploma::						
College:		Address:									
From:	To:	Did you graduate?	YES	NO	Degree:						
Other:		Address:									
From:	To:	Did you graduate?	YES	NO	Degree:						
References											
Please list t	hree professional referenc	ces.									
Full Name:					Relation	onship:					
Company:						Phone:					
Address:				Eı	mail:						

Full Name:				Relationship:	
				Phone:	
Address:		Email:			
Full Name:				Relationship:	
Company:				Phone:	
Address:			Email:		
	Previous E	Employme	ent		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S		Ending Salary:		
Responsibilities:					
From:	To:	Reason fo	or Leaving:		
May we contact your	previous supervisor for a reference?	YES	NO		
	previous supervisor for a reference?				
iviay we contact your	previous supervisor for a reference?				
Company:	previous supervisor for a reference?			Phone:	
Company:				Phone:Supervisor:	
Company: Address:					
Company: Address: Job Title:		Salary: <u>\$</u>		Supervisor:	
Company: Address: Job Title:	Starting S	Salary: <b>\$</b>		Supervisor:	
Company:  Address:  Job Title:  Responsibilities:  From:	Starting S	Salary: <b>\$</b>	or Leaving:_	Supervisor:	
Company:  Address:  Job Title:  Responsibilities:  From:  May we contact your	Starting S To: previous supervisor for a reference?	Salary: <b>\$</b> Reason fo	or Leaving:_	Supervisor:	
Company: Address: Job Title: Responsibilities: From: May we contact your   Company:	Starting S To: previous supervisor for a reference?	Salary: <b>\$</b> Reason fo	or Leaving:_	Supervisor:  Ending Salary:  Phone:	
Company: Address: Job Title: Responsibilities: From: May we contact your part of the company: Company: Address:	Starting S	Salary: <b>\$</b> Reason fo	or Leaving:_	Supervisor:  Ending Salary:  Phone:  Supervisor:	
Company: Address: Job Title: Responsibilities: From: May we contact your   Company: Address: Job Title:	Starting S	Reason for YES	or Leaving:	Phone: Supervisor:  Ending Salary:  Phone: Supervisor:  Ending Salary:  **Ending Salary:**	
Company: Address: Job Title: Responsibilities: From: May we contact your   Company: Address: Job Title:	Starting S	Reason fo	or Leaving:	Phone: Supervisor:  Ending Salary:  Phone: Supervisor:  Ending Salary:  **Ending Salary:**	

Mili	itary Service		
Branch:		From:	To:
Rank at Discharge:	Type of	Discharge:	
If other than honorable, explain:			
Disclaim	ner and Signa	ture	
I certify that my answers are true and complete to the	ne best of my kr	nowledge.	
I hereby grant permission to the City of Kingfisher to understand that this application is not a contract of a City of Kingfisher and all agents thereof from all liab information contained in this application form. Succ drug screening prior to offer of employment.	employment no pility in making a	r an offer of employr nny investigation and	nent. I hereby release the I inquiry relative to
Signature:		Da	te:
The City of Kingfisher is an Equal Opportunity Employer eligion, age, sex, national origin, marital status, disabil expression, or any other reason prohibited by law.			
3	3	Date Received:	