



BENTON EMPLOYMENT APPLICATION

Position Applied For

<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	
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Personal Information

Name:			
	Last	First	MI
Address:			
	Number	Street	City
			State
			Zip
			<input type="checkbox"/> Yes <input type="checkbox"/> No
Drivers License #	State	Social Security	Date of Birth
			Are you a U.S. Citizen?

Education

School Type	Name and Location of School	Years Attended	Graduate?	Subject Studied
Grammar School			<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business or Other Schools			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Military

<input type="checkbox"/> Yes <input type="checkbox"/> No				
Military Service?	U.S. Military Branch	Highest Rank Achieved	Date Entered	Date of Discharge

References

List references

Name	Address (City/State)	Telephone Number	Employer

Employment History

Company Name of Last or Present		Telephone
Address		
Date Hired	Salary	Title/Primary Job Task
Date Left	Salary	
Supervisor		Reason for Leaving
May we contact your present employer before a job offer is made?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Company Name of Next Previous		Telephone
Address		
Date Hired	Salary	Title/Primary Job Task
Date Left	Salary	
Supervisor		Reason for Leaving

Company Name of Next Previous		Telephone
Address		
Date Hired	Salary	Title/Primary Job Task
Date Left	Salary	
Supervisor		Reason for Leaving

Company Name of Next Previous		Telephone
Address		
Date Hired	Salary	Title/Primary Job Task
Date Left	Salary	
Supervisor		Reason for Leaving

Company Name of Next Previous			Address		Telephone
	Per		Per		
Date Hired	Salary	Date Left	Salary	Title/Primary Job Task	
Supervisor			Reason for Leaving		

Company Name of Next Previous			Address		Telephone
	Per		Per		
Date Hired	Salary	Date Left	Salary	Title/Primary Job Task	
Supervisor			Reason for Leaving		

Company Name of Next Previous			Address		Telephone
	Per		Per		
Date Hired	Salary	Date Left	Salary	Title/Primary Job Task	
Supervisor			Reason for Leaving		

Company Name of Next Previous			Address		Telephone
	Per		Per		
Date Hired	Salary	Date Left	Salary	Title/Primary Job Task	
Supervisor			Reason for Leaving		

Company Name of Next Previous			Address		Telephone
	Per		Per		
Date Hired	Salary	Date Left	Salary	Title/Primary Job Task	
Supervisor			Reason for Leaving		

Were you discharged for cause by any of your former employers?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, give details					



Criminal History

Have you ever been convicted of a Felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, Please explain	

Agreement

I agree to furnish any additional information requested and submit to written, oral and physical examinations required by the City of Benton procedures to complete their pre-employment evaluation. I understand and further consideration is precluded should I fail to provide requested information or for any reason not complete the examination procedure.

It is agreed and understood that this application for employment does not obligate the City of Benton to employ the applicant. Further, I understand and agree that if employed, my employment is at will only, for no term of definite duration, and is subject to rules, regulations and procedures adopted by the City of Benton.

This certifies that this application was completed by me, the undersigned, and that all entries and information contained herein are true and complete to the best of my knowledge. I understand that misrepresentation or omission of facts called for in this application, or any supplement thereto, will be sufficient grounds for disqualification or dismissal.

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Signature of Applicant

Date