

CITY OF ABILENE Application for Employment

PO Box 519, Abilene, KS 67410

The City of Abilene will consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Date _____ Position(s) Applied For: 1) _____ 2) _____

Referral Source: Advertisement Friend Relative Walk In Job Agency Other _____

Name _____
LAST FIRST MIDDLE EMAIL ADDRESS

Address _____
NUMBER STREET CITY STATE ZIP CODE

Telephone _____ Social Security # ____/____/____ Drivers License _____ State ____

If under 18 years old, can you provide proof of eligibility to work?..... No Yes

Have you filed an application with the City of Abilene before?..... No Yes Give date _____

Have you ever been employed by the City of Abilene before?..... No Yes Give date _____

Are you related to anyone currently employed by the City of Abilene?..... No Yes Give name _____

Are you currently employed?..... No Yes

May we contact your present employer?..... No Yes

Are you prevented from lawfully being employed in this country due to Visa or Immigration Status? No Yes
(Proof of citizenship or immigration status will be required of all new employees upon employment)

On what date would you be available for work? _____

Are you interested in working: Full Time Part Time Shift Work Temporary Seasonal

Are you on a lay-off and subject to recall?..... No Yes

Are you willing to travel if a job requires it?..... No Yes

Have you been convicted of a felony within the last 7 years?..... No Yes
(Conviction will not necessarily disqualify applicant from employment)

If Yes, please explain _____

-- The City of Abilene is an Equal Opportunity Employer --

Education & Training

| | Name & Address of School | Course of Study | Years Completed | Diploma/Degree |
|-----------------|--------------------------|-----------------|-----------------|----------------|
| Elementary | _____ | _____ | _____ | _____ |
| High School | _____ | _____ | _____ | _____ |
| Comm. College | _____ | _____ | _____ | _____ |
| Undergraduate | _____ | _____ | _____ | _____ |
| Graduate | _____ | _____ | _____ | _____ |
| Other (Specify) | _____ | _____ | _____ | _____ |

Please list/describe any specialized training, apprenticeship, certifications, skills, special job-related skills and qualifications:

List professional, trade, business or civic activities and offices held: *(You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.)*

Describe any job-related training received during military service:

Additional Information

Specialized Skills [Check skills you possess and list equipment you can operate]

Computer / (Type)

- Word Processing / _____
- Spreadsheets / _____
- Database / _____

Other

- Typewriter
- Calculator
- Fax Machine

Machinery & Equipment / (Type)

- Backhoe / _____
- Road Grader / _____
- Welder / _____
- Other _____ / _____

Please state any additional information you feel may be helpful to us in considering your application:

Note to Applicants: DO NOT ANSWER THE FOLLOWING QUESTION UNTIL YOU HAVE READ A COPY OF THE JOB DESCRIPTION EXPLAINING THE ESSENTIAL DUTIES OF THE POSITION FOR WHICH YOU ARE APPLYING.

Do you have any physical or mental limitations that would prevent you from performing the essential functions of the position for which you have applied? Yes No

References

| | | | | |
|----|-------|-----------|-------|----------------|
| 1. | _____ | (Name) | _____ | (Phone Number) |
| | _____ | (Address) | _____ | (Relationship) |
| 2. | _____ | (Name) | _____ | (Phone Number) |
| | _____ | (Address) | _____ | (Relationship) |
| 3. | _____ | (Name) | _____ | (Phone Number) |
| | _____ | (Address) | _____ | (Relationship) |

Employment History

Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

| | | | | |
|---|--------------------|--------------------|---------|-------------------------|
| 1 | Employer | Dates Employed | | Describe work performed |
| | Phone Number | From | To | |
| | Address | Hourly Rate/Salary | | |
| | Job Title | Starting | Current | |
| | Reason for leaving | | | |

| | | | | |
|---|--------------------|--------------------|---------|-------------------------|
| 2 | Employer | Dates Employed | | Describe work performed |
| | Phone Number | From | To | |
| | Address | Hourly Rate/Salary | | |
| | Job Title | Starting | Current | |
| | Reason for leaving | | | |

| | | | | |
|---|--------------------|--------------------|---------|-------------------------|
| 3 | Employer | Dates Employed | | Describe work performed |
| | Phone Number | From | To | |
| | Address | Hourly Rate/Salary | | |
| | Job Title | Starting | Current | |
| | Reason for leaving | | | |

| | | | | |
|---|--------------------|--------------------|---------|-------------------------|
| 4 | Employer | Dates Employed | | Describe work performed |
| | Phone Number | From | To | |
| | Address | Hourly Rate/Salary | | |
| | Job Title | Starting | Current | |
| | Reason for leaving | | | |

APPLICANT'S STATEMENT: I certify that the answers given here are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. Prior to employment, a criminal background check will be completed. This application shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time period, should inquire as to whether or not applications are being accepted at that time. I understand and acknowledge, unless otherwise defined by applicable law, that all employment relationships with the City of Abilene are "at will", which means an Employee may resign at any time with our without notice and the Employer may discharge an Employee at any time with or without cause, and with or without notice. It is further understood that this "at will" employment relationship may not be changed by an written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. I also understand that if I am employed by the City of Abilene, false or misleading information provided on my application or discovered during the course of an interview, may result in discharge. I further understand that if employed, I m required to abide by all rules and regulations of the City.

Signature of Applicant _____ Date _____



CITY OF ABILENE
419 N. BROADWAY, ABILENE, KANSAS 67410
Telephone: 785-263-2550 Fax: 785-263-2552

**DISCLOSURE TO EMPLOYMENT APPLICANT
REGARDING PROCUREMENT OF
A CONSUMER REPORT**

In connection with your application for employment, we may procure a Background Investigative Report and/or Background Report on you as part of the process of considering your candidacy as an employee. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision, we will provide you with a copy of the consumer report and a description in writing of your rights under the federal Fair Credit Reporting Act.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will be given a summary of these rights together with this document.

By your signature below, you hereby authorize us to obtain a consumer report and/or an investigative report about you in order to consider you for employment. The information requested below is being used strictly for pre-employment background screening purposes in order to obtain accurate results. The consumer report may include, but not be limited to, criminal history, verifications of employment and education, and driving records. A credit report detailing personal financial history will only be obtained for permissible purposes in consideration of jobs meeting specific criteria.

Applicant's Name: _____
(PLEASE PRINT)

Applicant's Address: _____

City/State/Zip: _____

Signature: _____

Social Security Number: _____

Date of Birth: _____

The EEOC states for the purpose of pre-employment inquiries, under the Age Discrimination in Employment Act of 1967, Section 1625.5, "A request on the part of an employer for information such as "Date of Birth" or "State Age" on an employment application form is not, in itself, a violation of the Act."

Driver's License Number: _____ State _____

CMKA Client #: **7161A**

*To All Applicants:
The information requested above is used to assist in the completion of a background investigation. The information will be maintained in a limited access file, detached from your application. The information will be used for the sole purpose of identification when conducting a background investigation.*

I have received a copy of my Summary of Rights Under the Fair Credit Reporting Act.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

| TYPE OF BUSINESS: | CONTACT: |
|---|--|
| Consumer reporting agencies, creditors and others not listed below | Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357 |
| National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name) | Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743 |
| Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks) | Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693 |
| Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name) | Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929 |
| Federal credit unions (words "Federal Credit Union" appear in institution's name) | National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600 |
| State-chartered banks that are not members of the Federal Reserve System | Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342 |
| Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission | Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306 |
| Activities subject to the Packers and Stockyards Act, 1921 | Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051 |