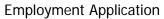
CITY OF MINDEN



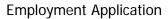


Phone: (308)-832-1820

APPLICANT INFORMATION																				
Last Nam	е							First					M.I.		Dat	ie				
Street Ad	reet Address												Apartment/Unit #							
City							State	te					ZIP							
Phone							E-mail A	Address												
Date Avai	lable					Social Se	ocial Security No.				Des			ired Salary						
Position A	Applied	d for						If t				under the age of 19, please provide DOB.								
Are you a	citize	en of the United States?				YES 🗆	N	o 🗆	If no, are you authorized				to w	ork in th	ie U.S.	.?	YES	5 🔲	NO	
Have you	worked for this company?			YES 🗌	N	0 🗆	If so, when?													
EDUCAT	ΓΙΟΝ																			
High Scho	igh School						Address													
From	rom		То	Did you gra		graduate?	YES 🗌		NO 🗆	Degree Degree										
College							A	ddress												
From	1		To Did you g		graduate?	ate? YES 🗌		NO 🗆	Degree											
Other	Other		1			Address														
From	m		То	Did you gi		graduate?	YES 🗆		NO 🗆	NO Degree										
REFERE	NCE	s																		
Please lis	t three	e pro	fessic	onal refere	ences.															
Full Name	9										tions	ship								
Company											Phone									
Address																				
Full Name	9									Relationship										
Company										Phor	ne									
Address																				
Full Name										Relationship										
Company										Phone										
Address									'											

The City of Minden is an Equal Opportunity Employer. We do not discriminate on the basis of race, religion, color, sex, age, national origin or disability and the position is subject to a veterans preference.

CITY OF MINDEN





Phone: (308)-832-1820

PEVIOUS EMPLOYMENT										
Company			Phone							
Address			Supervisor							
Job Title			Starting Salary	\$		Ending Salary \$				
Responsibilities										
From	То	Reason for Leaving								
May we contact you	ur previous superv	isor for a reference?	NO 🗆							
Company			Phone							
Address			Supervisor							
Job Title			Starting Salary	\$		Ending Salary \$				
Responsibilities										
From	n To Reason for Leaving									
May we contact your previous supervisor for a reference? YES NO										
Company			Phone							
Address			Supervisor							
Job Title			Starting Salary	\$		Ending Salary \$				
Responsibilities										
From	To Reason for Leaving									
May we contact your previous supervisor for a reference? YES NO										
MILITARY SER	VICE				_	-				
Branch				From	To					
Rank at Discharge Type of Discharge										
If other than honorable, explain										
DISCLAIMER, EMPLOYMENT AT WILL AND SIGNATURE										
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I understand that neither this application nor any communication by a management representative is intended to create or does create a contract of employment, offer, or promise of employment. I acknowledge that if hired by the city, employment is on an at-will basis. This means the city is free to terminate my employment at any time, with or without cause or advance notice, in accordance with state law, and acceptance of employment is not a contract of employment for any specified time. Similarly, I am free to terminate my employment with the city at any time for any reason. This at-will provision may be modified or waived only in a written agreement signed by an authorized representative of the city, and I understand that the city has complete discretion to modify such rules and regulations at any time, except that it will not modify its policy of employment at-will.										
Signature Date										

The City of Minden is an Equal Opportunity Employer. We do not discriminate on the basis of race, religion, color, sex, age, national origin or disability and the position is subject to a veterans preference.