



City of Ashville Employment Application

www.cityofashville.org

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion, and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability.

Position(s) Applied for _____ Date of Application _____

Name _____
Last First Middle

Address _____

City _____ State _____ Zip _____

Phone Number _____ Cell _____

Email _____

How did you hear about us? _____

1. GENERAL INFORMATION

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation? Yes No

If you are under 18 years of age, can you provide required proof of your eligibility? Yes No

Have you applied with us before? Yes No If yes, give date: _____

Do you have friends or relatives currently employed with the City of Ashville? Yes No

Name(s) _____

Are you legally eligible for employment in the United States? **If offered employment, documentation is required to be provided of eligibility and must comply with E-Verify and all Alabama immigration laws.* Yes No

Date available to work: ___/___/_____

Desired pay range: _____

Shifts available to work:

Full Time Shift 1 2 3

Part Time Mornings Afternoons Evenings

Temporary Dates available: ___/___/___ to ___/___/___

Are you available to travel if the job you are applying for requires it? Yes No

6. APPLICANT'S STATEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge.

I authorize a background investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize persons, schools, current and former employers, and other organizations and agencies to provide the City with all information that may be requested. I hereby release the City, persons, and agencies providing and retaining such information from any and all claims and damages connected with their release of any requested information.

I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the City of Ashville may discharge employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by authorized personnel of the City.

I understand that depending upon the position for which I am applying, I may be required to submit to and pass a drug test as a condition precedent of employment. If required by the City, I hereby consent to the drug test at a facility of the City's selection and consent to and authorize the testing facility and the applicable employees / agents thereof to provide the results of said test to the City.

Signature of Applicant

Date

OFFICE USE ONLY

Arrange Interview Yes No

Notes

Interviewer _____ Date _____

Employed Yes No Date of Employment ___/___/_____

Job Title _____ Pay Rate _____ Department _____

Authorized by _____ Date _____