

**APPLICATION FOR EMPLOYMENT**

**CITY OF FLANDREAU**  
1005 W. Elm Avenue  
Flandreau, SD 57028-1404

**An Equal Opportunity Employer**

**I. Personal Information**

Position Applying for: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street/Box City State Zip

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you under age 18?  Yes  No Are you legally eligible to be employed in the United States?  Yes  No

Employment for which you are available:  Full-Time  Permanent  Seasonal  Part-Time  Temporary (Less than 6 months)

When could you begin employment? Now - beginning on \_\_\_\_\_ or after \_\_\_\_\_ days' notice to current employer.

May we contact your current or most recent employer regarding your qualifications?  Yes  No

**II. Education and Training**

Circle last year of education completed. (High school diploma/GED) circle "12". 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 +

Please list name of school and degrees completed. Please indicate diploma, GED, or BS/BA

	Locations	Majors/ credit hours	Graduated
High School _____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
College/University _____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School _____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Business or Vocational School _____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Internships: \_\_\_\_\_  
\_\_\_\_\_

Additional Training (workshops, seminars, apprenticeships, military or other training). Include approximate hours or days of training.  
\_\_\_\_\_  
\_\_\_\_\_

List any relevant licenses or certificates:  
\_\_\_\_\_  
\_\_\_\_\_

**III. Employment History - Most Recent Position: *(Limit experience to last ten (10) years)***

Job Title \_\_\_\_\_ No. of employees supervised \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Last Salary \$ \_\_\_\_\_

Hours worked per week: (1-10) (11-20) (21-30) (31-40) Dates of Employment: From (mo/yr) \_\_\_\_\_ to (mo/yr) \_\_\_\_\_

Supervisor's Name & Title \_\_\_\_\_

Employer/Address \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Complete description of duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Next Previous Position:**

Job Title \_\_\_\_\_ No. of employees supervised \_\_\_\_ Starting Salary \$ \_\_\_\_\_ Last Salary \$ \_\_\_\_\_  
Hours worked per week: (1-10) (11-20) (21-30) (31-40) Dates of Employment: From (mo/yr) \_\_\_\_\_ to (mo/yr) \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
Employer/ Address \_\_\_\_\_ Phone: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Complete description of duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Next Previous Position:**

Job Title \_\_\_\_\_ No. of employees supervised \_\_\_\_ Starting Salary \$ \_\_\_\_\_ Last Salary \$ \_\_\_\_\_  
Hours worked per week: (1-10) (11-20) (21-30) (31-40) Dates of Employment: From (mo/yr) \_\_\_\_\_ to (mo/yr) \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
Employer/ Address \_\_\_\_\_ Phone: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Complete description of duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Next Previous Position:**

Job Title \_\_\_\_\_ No. of employees supervised \_\_\_\_ Starting Salary \$ \_\_\_\_\_ Last Salary \$ \_\_\_\_\_  
Hours worked per week: (1-10) (11-20) (21-30) (31-40) Dates of Employment: From (mo/yr) \_\_\_\_\_ to (mo/yr) \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
Employer/ Address \_\_\_\_\_ Phone: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Complete description of duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Job Title \_\_\_\_\_ No. of employees supervised \_\_\_\_ Starting Salary \$ \_\_\_\_\_ Last Salary \$ \_\_\_\_\_  
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Supervisor's Name & Title \_\_\_\_\_  
Employer/ Address \_\_\_\_\_ Phone: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Complete description of duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IV. Additional Space.** Use this block to complete information given elsewhere on this form. If you still need more space, attach additional sheets. You may also use this space to summarize other pertinent education or experience which qualifies you for the position for which you are applying.

**V. Other General Information**

Do you have a valid driver's license? (A valid driver's license is a job-related requirement of some positions with the City of Flandreau.)  Yes  No

Do you have a valid commercial driver's license? (A valid commercial driver's license is a job-related requirement of some positions with the City of Flandreau.)  Yes  No

Have you ever been convicted of a felony? (Criminal convictions are not an absolute bar to employment but are considered in relation to specific job requirements.)  Yes  No

Please list charge and disposition and a brief comment about how you perceived the incident:

\_\_\_\_\_  
\_\_\_\_\_

Can you work the normal work hours, overtime and on Saturdays and Sundays?  Yes  No

How did you hear about employment opportunities with the City of Flandreau?

\_\_\_\_\_  
List any volunteer or paid employment (not included in *EMPLOYMENT HISTORY*) which relates to the position for which you are applying:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain any lapses of employment which are longer than three (3) months: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**VI. Authorization**

I hereby give City of Flandreau the right to investigate my past employment, education and activities. I release from all liability all persons, companies and corporations who supply such information. In indemnify City of Flandreau against any liability that might result from such investigation. I understand that any false answer or statements or implications I might make in this application, or in any other required document, shall be considered sufficient cause to deny employment, or discharge, if already employed.

Initial: \_\_\_\_\_

I also understand that nothing contained in this application or in the granting of an interview is intended to create an employment contract between City of Flandreau and myself for employment or for any benefit. I have received no promises regarding employment and I understand that no such promise or guarantee is binding on City of Flandreau, unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that City of Flandreau has a similar right.

Initial: \_\_\_\_\_

I understand that I must be able to perform the essential functions of my perspective job duties, either with or without a reasonable accommodation. I agree to undergo any lawful examinations, including a physical examination.

Initial: \_\_\_\_\_

In the event that I am hired, I will abide by all of the City's rules, regulations, policies and practices and understand that these may be changed from time to time at the discretion of the City of Flandreau.

Initial: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date