

FORMER EMPLOYERS (List below last four employers, starting with the last one first)

Date (year to year)	Name and Address of Employer	Salary	Position	Reason for leaving
1.				
2.				
3.				
4.				

REFERENCES: Give the names of three persons, not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted	Phone Number
1.				
2.				
3.				

GENERAL

Subjects of special study or research work

U.S. Military or Naval Service _____ Rank _____ Present membership in Nat. Guard or Reserves? _____

In case of emergency notify: _____

I certify that the facts contained in his application are true and complete to the best of my knowledge and understand that, if employed; falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

Date _____ Signature _____

FOR DEPARTMENT OF PUBLIC WORKS APPLICANTS AND POLICE DEPARTMENT APPLICANTS:

Do you have a valid Driver's License? Yes No

Driver's License Number _____