

APPLICATION FOR EMPLOYMENT

Waterloo Center for the Arts/Phelps Youth Pavilion

225 Commercial Street Waterloo, IA 50701 Phone: (319) 291-4490 Fax: (319) 291-4270

Please complete the application in its entirety, print clearly. Check yes/no where indicated. If information required is not applicable, please use N/A in that blank. Please make copies (keep your originals) of all materials that you submit.

Date of Application:	Date Available:
Position(s)/Type of work applying for:	
Full Name as shown on Social Security Card: Please Provide any previous name(s) under which educational or employment records may be found and the year(s) used:	Street Address: City/State/Zip:
E-mail Address:	Telephone Number: Cell Phone Number:
Do you plan to work another job while you are employed with us? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please share name of employer, your title/position, and shift information:	
Have you previously been employed by the City of Waterloo? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please state department, position, and dates of employment: :	
Are you related to anyone currently employed by the City of Waterloo? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please state their name and relationship:	
Are you 18 or older? <input type="checkbox"/> yes <input type="checkbox"/> no If no, what age are you? Are you legally authorized to work in the U.S.? <input type="checkbox"/> yes <input type="checkbox"/> no (If offered employment, eligibility documentation will be required.)	With or without reasonable accommodation (modification) are you able to perform the essential job functions required of the position for which you are applying? <input type="checkbox"/> yes <input type="checkbox"/> no If no, please explain:
Do you have a current and valid driver's license? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please write your driver's license number:	
Is this a commercial Driver's License? <input type="checkbox"/> yes <input type="checkbox"/> no Class:	
Have you used any illegal drugs in the past 30 days? <input type="checkbox"/> yes <input type="checkbox"/> no	

The City of Waterloo is an equal opportunity employer and selects the best qualified individual for the position based on job-related qualifications regardless of race, age, color, creed, religion, sex, national origin, citizenship status, pregnancy, familial status, military or veteran status, mental or physical disability, gender identity, sexual orientation, genetic information, or other status protected by law or city ordinance.

EDUCATION

SCHOOLS ATTENDED	NAME OF SCHOOL & LOCATION	DID YOU GRADUATE?	DEGREE/DIPLOMA OR CERTIFICATE	MAJOR COURSE OF STUDY
HIGH SCHOOL/GED		[] YES [] NO	(If no, circle last grade completed) 8 9 10 11	
VOC/TECH, BUSINESS OR MILITARY SERVICE		[] YES [] NO		
COLLEGE OR UNIVERSITY		[] YES [] NO		
COLLEGE OR UNIVERSITY		[] YES [] NO		

WORK EXPERIENCE

List your work/qualifying experiences for the previous 10 years, starting with the most recent. Place additional experiences on a separate sheet of paper. If you do not want your current employer contacted, please indicate. Include any relevant military or volunteer service.

Last or Current Employer:	Dates of Employment: From: (month/year) To: (month/year)
Street Address:	Job Title/Position:
Name of Supervisor & Phone Number:	Reason for Leaving:
Hours Worked Per Week:	Wage:
Job Duties/Responsibilities:	
Employer:	Dates of Employment: From: (month/year) To: (month/year)
Street Address:	Job Title/Position:
Name of Supervisor & Phone Number:	Reason for Leaving:
Hours Worked Per Week:	Wage:
Job Duties/Responsibilities:	
Employer:	Dates of Employment: From: (month/year) To: (month/year)
Street Address:	Job Title/Position:
Name of Supervisor & Phone Number:	Reason for Leaving:
Hours Worked Per Week:	Wage:
Job Duties/Responsibilities:	

VOLUNTEER/OTHER EXPERIENCE

Organization:	Dates of Volunteerism:
Reference Name & Contact information:	Description of work:
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Reference Name & Contact information:	Description of work:

PROFESSIONAL REFERENCES

List at least three related to employment.

Reference's Name:	Address:	Relationship:
Phone Number:		
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Phone Number:		
Reference's Name:	Address:	Relationship:
Phone Number:		

SPECIAL SKILLS OR QUALIFICATIONS

SCHEDULE OF AVAILABILITY

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

AUTHORIZATION AND RELEASE

By my signature below, I certify that the answers given herein are true and complete to the best of my knowledge. I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably. I understand that any material omission, misrepresentation, or false information given in my application, on my resume, or in my interview(s) may result in my not being considered for employment; and if not discovered by the City until after my becoming employed, may result in my immediate termination.

I authorize you to communicate with persons listed as references, current/former employers, and any others whom you deem necessary in arriving at an employment decision. I further authorize any current/former employer(s), educational institution, or government agency to give to any authorized representative of the City of Waterloo, Iowa, any information which they may have bearing upon my present or previous employment, criminal record (including the list of sex offenders and the child abuse registry), motor vehicle record, and/or such record as may be deemed necessary to determine my fitness for the subject position. I agree to release from all liability all persons and organizations supplying such information and I also release the City of Waterloo and its representatives for seeking, gathering, and using such information to make an employment decision.

I understand that completion of this Application for Employment does not guarantee that I will be employed by the City of Waterloo. If an employment offer is extended to me and I accept it, I understand that I am required to abide by all applicable policies, rules and regulations of the City of Waterloo. I understand that according to Federal law all individuals who are hired must, as a condition of employment, produce certain documentation verifying their identity and legal authorization to work in the United States. If the position for which I am applying requires it, I understand that an offer of employment may be made contingent upon my passing a job-related physical examination and/or controlled substances screening. If required, I agree to submit to a controlled substances screening and physical examination by the City's designated medical provider. If employed, I agree to engage in no outside activity which would involve a material conflict of interest with the City, or which could reflect adversely on the City.

Signature _____ Date _____