## **Civil Service Commission of East Liverpool** 126 West 6<sup>th</sup> Street East Liverpool, OH 43920 Phone: 330-385-4388 FAX: 330-385-3955

## **Employment Application**

		Applicant li	nform	ation							
Full Name:					Date:						
	Last First				M.I.						
Address: Street Address						Apartment/Unit #					
	City				State	ZIP Code					
Phone:		E	∃mail								
Date Available:											
Position Applied for:											
Are you a ci	tizen of the United States?	YES NO	If no, a	are you a	authorized to	YES work in the U.S.?	NO				
Have you ever worked for the City previously?		YES NO	If yes,	when?_							
Education											
High School: Address:											
From:	To:	Did you graduate?	YES	NO	Diploma:						
College:		Address:									
From:	To:	Did you graduate?	YES	NO	Degree:						
Other:		Address:									
From:	То:	Did you graduate?	YES	NO	Degree:						
Previous Employment											
Company:					F	Phone:					
Address:					Supe	ervisor:					

Job Title:	St	Starting Salary:\$			Ending Salary:\$				
Responsibili	ties:								
From:	To:		Reason f	for Leaving:_					
May we con	act your previous supervisor for a refere	ence?	YES	NO					
Company:					Phone:				
Address:					Supervisor:				
Job Title:	St	arting Sa	Ending Salary:						
Responsibili	ties:								
From:	To:		Reason	for Leaving:_					
May we con	act your previous supervisor for a refere	ence?	YES	NO					
Do you have	a driver's license? Yes No_								
Do you have	a Commercial Driver's License/CDL?	Yes_		No					
If yes, CDL	License No.				-				
Military Serv	ice: YesNo								
If yes, please submit a copy of your DD214, with proof of Honorable Discharge and current Reserve Status									
	Discla	imer an	d Signa	ature					
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.									
Signature:	_				Date:				