

List the specific expertise, experience, skills, or qualifications that qualify you for the position(s) you are applying for and any relevant training, special courses, work training programs, POST certifications or military training you have received along with the number of training hours for each: _____

**List below present and past employment, beginning with your most recent
Include paid or unpaid, full or part-time, military, summer jobs, etc.**

May we check with your present supervisor? YES _____ NO _____

NOTE: We may contact any previous supervisor to verify your description of past duties.

Starting Date	Ending Date	Name & Address of present or last employer		Title of Position
Starting Salary _____ per _____	Ending Salary _____ per _____	Hours per week	Name, title & phone number of your immediate supervisor	
Reason for leaving				
Description of duties & responsibilities				

Starting Date	Ending Date	Name & Address of present or last employer		Title of Position
Starting Salary _____ per _____	Ending Salary _____ per _____	Hours per week	Name, title & phone number of your immediate supervisor	
Reason for leaving				
Description of duties & responsibilities				

Starting Date	Ending Date	Name & Address of present or last employer		Title of Position
Starting Salary _____ per _____	Ending Salary _____ per _____	Hours per week	Name, title & phone number of your immediate supervisor	
Reason for leaving				
Description of duties & responsibilities				

If there is a particular employer(s), you do not wish us to contact, please indicate which one(s). _____

Have you ever been fired from a job or otherwise asked to leave (instead of being fired to submit your resignation)? _____

PERSONAL REFERENCES (Not Former Employers or Relatives)

Name	Business or Home Address	Business or Home Phone Number	Occupation

What prompted you to apply for City employment?

- a. Newspaper_____ b. City Employee_____ c. School_____ d. City Website_____ e. Friend_____ f. Other_____

Certification: I certify that the information supplied in this application is complete and true to the best of my knowledge, and I understand that any misstatement or omission of fact will subject me to dismissal or disqualification. I hereby authorize verification of the information given on or in conjunction with this application. A reproduction of this authorization shall be construed as if an original. Furthermore, I understand that, if offered employment, I may be required to pass any necessary post-offer physical examination including drug screening.

Signature of applicant _____ **Date** _____

NOTICE
A Credit Reporting Agency report or other report
May be requested and/or used

And

Authorization for CRA request and/or use
And for Release of Information

NAME _____ Date of Birth _____

ADDRESS _____

SSN _____

In connection with your employment application and possible employment by Belton Parks & Recreation, Belton Parks & Recreation may seek information -- including background checks, credit record checks, educational institution checks, licensing checks, employment record checks, criminal and civil records checks or otherwise obtain information – to determine suitability for the position and during employment.

I, _____, understand that Belton Parks & Recreation may request and may obtain information as set forth above about me. I consent to Belton’s request for and use of this information, both prior to and during employment, and authorize the release of the information.

SIGNATURE

DATE