CITY OF PERU APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age disability, marital or veteran status, sexual orientation, or any other legally protected status.

disability, marital or vetera	in status, sext	uai orientatio	n, or any oth	ier legally pr	otected statu	S.	
PLEASE PRINT							
POSITION APPLIE	DATE OF APPLICATION						
LAST NAME		FIRST NAME			MIDDLE NAME		
ADDRESS		CITY			STATE & ZIP		
HOME PHONE ALT PHONE				SOCIAL SECURITY NUMBER			
If you are under 19 years of age of	an vou prov	ido roquiro	d proof of				
If you are under 18 years of age, can you provide required proof of your eligibility to work?				YES	OR	NO	
Have you ever filed an application with us prior to this date?				YES	OR	NO	
Have you ever been employed with us before: Please provide dates:				YES	OR	NO	
Are you currently employed?							
May we contact your present employer?					OR	NO	
Are you prevented from lawfully because of Visa or Immig	YES	OR	NO				
(PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT.)							
On what date would you be available for work?							
Are you available to work?	Full Time:		Part Time		Temporary:		
Are you currently on "lay-off" status and subject to recall?				YES	OR	NO	
Have you ever been convicted of a felony within the last 7 (seven) years?					OR	NO	
If yes, please explain: (CONVICTION WILL NOT NECESSARILY DISQUALIFY AN APPLICANT.)							

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EDUC.	ATION			
			ENDED & DEGREE	
	SCHOOLS			DEGREES
	D 500D 1D 5 44 1/4 01			
	DESCRIBE ANY SI	PECIALIZED TRAI	NING, APPRENTIC	CESHIP, AND SKILLS:
EMPL	OYMENT EXPERI	ENCE		
tart with	your present or last job Ti	nclude any ioh-rela	ated military service	assignments and volunteer activities
				national origin, disabilities or other
rotected	-	, , , , , , , , , , , , , , , , , , , ,	-, - 0 - , 0 ,	, , , , , , , , , , , , , , , , , , ,
1	EMPLOYER			
	ADDRESS			
	PHONE #		TITLE	
	SUPERVISOR			
	REASON FOR LEAVING			
	DATES EMPLOYED	FROM:		_то:
2	EMPLOYER			
	ADDRESS			
	PHONE #		TITLE	
	SUPERVISOR			
	REASON FOR LEAVING			
	DATES FLADI OVED	50014		
	DATES EMPLOYED	FROM:		_TO:
		\ <u>\</u>		
OTHE	R QUALIFICATIO	NS .		
Sur	mmarize special job-related	skills & qualificati	ons acquired from e	employment or other experience.

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REFERENCES						
, that all facts set forth in this application are true.						