



RIVERTON CITY CORPORATION Application for Employment

We only accept applications for posted positions

IMPORTANT!

READ THE FOLLOWING INSTRUCTIONS CAREFULLY BEFORE FILLING
OUT YOUR APPLICATION.

All requested information must be furnished. The information you give will be used to determine your qualifications for employment. It is important that you answer all questions on your application fully and accurately. I hereby certify that I, the undersigned applicant, have personally completed this application, or noted the name of the individual assisting me in the completion of this application. *I understand that any omission or misstatement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.* If an item does not apply to you, or if there is no information to be given, please write in the letters "N/A" for Not Applicable. Use a typewriter or **print clearly in black ink**

Should you need any special accommodations to participate in the application process (i.e., assistance in completing the application, accommodations for the interview, accommodations for any job-related employment tests, or any other needed accommodations), please let us know at the time of application, or at the time an appointment is scheduled.

POSITION

Title or type of position: _____

Type of employment acceptable: Full-time Part-time Temporary

What is the lowest entrance salary you will accept in any position? \$ _____

Date available: _____

PERSONAL INFORMATION

Name: _____
(First) (Middle) (Last)

Address: _____
(Street) (City) (State) (Zip Code)

Phone #s: _____ E-mail: _____

Are you at least 18 years of age? Yes No

Do you have a legal right to work in the United States? Yes No

Have you been convicted of a felony Yes No

If yes, explain (attach additional pages if needed)

Note: A felony conviction may not automatically disqualify you from employment.

Do you have any disabilities that would prevent you from performing the job you are applying for? Yes No

EMPLOYMENT HISTORY

Answers given in this section may be verified with former employers, start with your present or most recent position and work backward. Include all jobs you have held in the past 10 years.

Position title:	Dates of employment from: to:	Average number of hours worked per week:
Employer (company) name and address:		
Your duties:		

Reason for leaving: _____

Supervisor's Name, Title and Telephone #: _____

May we inquire of your present employer for references or verification Yes No

Position title:	Dates of employment from: to:	Average number of hours worked per week:
Employer (company) name & address:		
Your duties:		

Reason for leaving: _____
Supervisor's Name, Title and Telephone #: _____

Position title:	Dates of employment from: to:	Average numbers of hours worked per week:
Employer (company) name & address:		
Your duties:		

Reason for leaving: _____
Supervisor's Name, Title and Telephone #: _____

OTHER JOB-RELATED SKILLS/TRAINING/EXPERIENCE

Have you received any specialized training which would qualify you for the position for which you are applying that you have not already listed on this application? If so, please state below.

EDUCATION INFORMATION

Type of School	Name and Location	Years Completed	Major Course of Study	Graduated (Yes or No)	Degree
High School					
College/ University					
Graduate School					
Technical/ Business					

Please list any job-related professional, business, or civic activities, organizations, and associations in which you participate, or of which you are a member. (You may omit those which indicate race, color, religion, political affiliation, national origin, ancestry, disability, sex or age.)

JOB RELATED SKILLS AND ABILITIES (Mark your current job-related skills and abilities; may be subject to examination)

Clerical Skills

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> Type: _____ wpm | <input type="checkbox"/> 10 key proficient | <input type="checkbox"/> Fax machine |
| <input type="checkbox"/> Microsoft Word | <input type="checkbox"/> Copy machine | |
| <input type="checkbox"/> Microsoft Excel | <input type="checkbox"/> P.C. | |

Mark the job tasks in which you have experience and ability.

- | | |
|--|--|
| <input type="checkbox"/> Acting as a receptionist and answering phones | <input type="checkbox"/> Computing with numbers |
| <input type="checkbox"/> Composing correspondence, preparing reports | <input type="checkbox"/> Typing tables or graphs |
| <input type="checkbox"/> Filing, sorting, and arranging documents | |

Operator skills

Mark the equipment and machinery you can operate (your skills may be tested)

- | | | |
|---|---|--|
| <input type="checkbox"/> Asphalt roller | <input type="checkbox"/> Diesel trucks | <input type="checkbox"/> Trencher |
| <input type="checkbox"/> Asphalt laydown | <input type="checkbox"/> Standard pickup | <input type="checkbox"/> Welder |
| <input type="checkbox"/> Asphalt cutter | <input type="checkbox"/> Backhoe | <input type="checkbox"/> Rodder |
| <input type="checkbox"/> Bucket truck | <input type="checkbox"/> Front-end loader | <input type="checkbox"/> Water pumps |
| <input type="checkbox"/> Snow Plow | <input type="checkbox"/> Street sweeper | <input type="checkbox"/> High-pressure sewer cleaner |
| <input type="checkbox"/> 10-Wheel dumptruck | <input type="checkbox"/> Tapping machines | <input type="checkbox"/> Grader |

Other equipment, machinery, etc.

CERTIFICATION

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION FORM BELOW

RIVERTON CITY CORPORATION IS AN EQUAL OPPORTUNITY EMPLOYER

And provides by city code that employment and promotion in the city government shall be based on merit and fitness, free of personal and political considerations, and shall in no way be influenced by religion, creed, color, sex, age, national origin, or ancestry.

IMMIGRATION REFORM AND CONTROL ACT (IRCA 1986)

The City of Riverton complies fully with the Immigration Reform and Control Act of 1986. You are required to establish your identity and eligibility to work in the United States by completing INS Form I-9 no later than the third day after beginning work. Failure to meet this requirement within the time specified will result in termination of employment.

POLICY ON A DRUG-FREE WORKPLACE

Riverton City believes that alcohol and illegal drugs in the work place are unhealthy and dangerous, not only to the employee involved, but to other employees as well. The unlawful manufacture, distribution, dispensing, possession, use, or being under the influence of alcohol and illegal drugs is prohibited on the City premises, in City vehicles, in employee's vehicles, or any time the employee is representing the City on City business. Riverton City enforces Pre-Employment, random, and "for cause" drug testing. All prospective employees shall be tested for drug or alcohol at least two business days prior to being placed for employment.

Be careful that you have answered all questions on your application correctly and considered all statements fully so that your eligibility can be decided on all the facts.

The information I have given on this application is true and correct to the best of my knowledge. I hereby authorize Riverton City to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment. *I authorize Riverton City to conduct a pre-employment drug screen and background check if I am presented with a job offer.* I understand the results of these tests may preclude me

from being employed with Riverton City. I further authorize my former employer(s) to disclose to Riverton City any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosures. In addition, I hereby release Riverton City, my former employers, and all other persons, corporations, partnerships, and associations from any and all claims demands, or liabilities arising, or that may arise, out of, or in any way related to such investigation or disclosure.

As part of this application, I understand that if I am employed I will be required to comply with Riverton City's policies and procedures for employees. I understand that these policies and procedures may be changed, interpreted, withdrawn, or added to by the Riverton City at the discretion of Riverton City and without prior notice to me.

I acknowledge and agree that this application will be considered by Riverton City for no longer than 6 months from the date it was made.

I understand that nothing contained in the application or conveyed during any interview, which may be granted, is intended to create an employment contract between Riverton City and myself. In addition, I understand and agree that if I am employed, my employment is at-will until I successfully complete the specified 6 month probationary status. Prior to the date I successfully complete my probationary status, I understand that my employment is for no definite or determinable period.

oPRIVACY ACT NOTICE: As an applicant, disclosure of your social security number is voluntary, but helpful to identify and match your application information. If you are hired, section 6109 of the Internal Revenue Code requires you to give your correct social security number to persons who must file returns with the IRS to report certain information. Riverton City confidentially maintains your social security number for identification purposes and routine uses, such as facilitating document matching, and administering benefits. Riverton City will provide this information to the IRS, to any third party that provides this information to the IRS on behalf of Riverton City, and may provide this information to other agencies to carry out federal or state law. Providing your social security number at this time will facilitate these uses if you become an employee.o

DATE: _____ **SIGNATURE OF APPLICANT:** _____

PRINTED NAME: _____

If this application has been completed by an individual other than the above applicant, please print name here:

Please return to:

**RIVERTON CITY CORPORATION
PO BOX 429, RIVERTON, UT 84065
ATTACH RESUME IF DESIRED**