

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE)

THE CITY OF ROCKLAND IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

NAME: _____ SS#: _____ Telephone: _____
(last) (first) (middle)

Present Address: _____
(street) (city) (state) (zip)

Permanent Address: _____
(street) (city) (state) (zip)

YES NO

Are you 18 years of age or older?

Are you a citizen of the United States?

If not a citizen of the United States, do you intend to become a citizen of the United States?

Please list any languages, other than English, which you speak and/or write fluently: _____

EMPLOYMENT DESIRED

Department/Company _____ Position _____

Date you can start _____ Salary Desired: _____

YES NO

Are you currently employed?

If so, may we inquire of your present employer?

Have you ever applied to this organization before:

If Yes: Where? _____ When? _____

EDUCATION	Name and Location of School	No. of Years Attended	Did you Graduate?	Subjects Studied
Grammar School				
High School				
College				
Other (Trade, Business, Correspondence Schools)				

GENERAL

Subjects of special study or research work, or skills: _____

U.S. Military/Naval Service _____ Rank _____
 Present membership in National Guard or Reserves: Yes _____ No _____

FORMER EMPLOYERS	(List below your last four employers, starting with the last one first)			
Date (Month/Year)	Name and Address of Employer	Salary	Position	Reason for Leaving
From _____ To _____				
From _____ To _____				
From _____ To _____				
From _____ To _____				

REFERENCES	Give the names of three persons not related to you, whom you have known for at least one year		
Name	Address/Phone	Business	Years Acquainted

PHYSICAL RECORD: Do you have any impairments, physical, mental, or medical which could interfere with your ability to do the job for which you have applied? Yes _____ No _____
 If yes, please describe: _____

In Case Of Emergency, Notify:

 (name) _____ (address) _____ (phone) _____

I certify that the facts contained in this Application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this Application shall be grounds for dismissal.
 I authorize the investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.
 I understand and agree that if hired, my employment is for no definite period and may, regardless of the date of payment of wages and salary, be terminated at any time without any prior notice.

Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

Interviewed by: _____ Date: _____
 _____ Date: _____
 _____ Date: _____
 _____ Date: _____

Salary/Wage: _____ Hired: Yes _____ No _____

Date Reporting for Duty: _____

Approved by: _____
 Personnel Director _____ Department Head _____

RELEASE OF INFORMATION

I understand that in order to assess my qualifications for the above-referenced position, a full background investigation is necessary. I, therefore, authorize the City of Rockland to conduct an investigation which may include verification of information provided by me to the City of Rockland; a financial management check; contacting persons, institutions, government and law enforcement agencies for character references and record history information; contacting employers for performance information; and verifying educational attainment. All the information and materials I have provided to the City of Rockland as part of the employment process are accurate and truthful.

I authorize all my present and previous employers or references to furnish information concerning my personal character, habits or employment performance. I also authorize schools which I have attended to provide verification of educational attainment and other relevant information.

Social Security Number

Signature

Driver's License No. and State

Date