



CITY OF KETTERING

# Application for Employment

Full-Time \_\_\_\_\_

Part-Time \_\_\_\_\_

Temporary \_\_\_\_\_

POSITION: \_\_\_\_\_

BASIC EMPLOYMENT DATA			
A. GENERAL INFORMATION			
Name: _____			
Address: _____			
	City	State	Zip Code
Phone No. _____	Work Phone No. _____		
Cell/Other _____	E-Mail Address _____		
Social Security No. _____			
Military Service? YES _____ NO _____ (If yes, indicate branch, inclusive dates of service and rank at discharge.)			
_____			
Do you have a valid Ohio Driver's License? YES _____ NO _____ (If yes, indicate type of license.)			
Operator's _____ Commercial Driver's License _____			
State here any additional information required to answer the above questions adequately or that you feel would be helpful for pre-employment inquiry. _____			
_____			
Are you related to any City employee? YES _____ NO _____ If so, who is the City employee or part-paid volunteer firefighter and what is the relationship? _____			
Are you a minor (under 18) child or stepchild of a current City of Kettering employee or part-paid volunteer firefighter? YES _____ NO _____			
If yes, name of employee or part-paid volunteer firefighter _____			

B. EDUCATION AND TRAINING													
Circle the highest school grade completed.													
	<u>High School</u>					<u>College</u>							
	9	10	11	12		13	14	15	16	17	18	19	20
Degrees obtained or areas of study: _____													
List any job-related schools attended or vocational training received: _____													
_____													

**C. PAST WORK EXPERIENCE  
(List most recent first)**

Month From	Year To	Month To	Year	Title of Your Position	Annual Salary
Name of Employer: _____					
Nature of Duties: _____					
Reason for Leaving: _____					
Month From	Year To	Month To	Year	Title of Your Position	Annual Salary
Name of Employer: _____					
Nature of Duties: _____					
Reason for Leaving: _____					
Month From	Year To	Month To	Year	Title of Your Position	Annual Salary
Name of Employer: _____					
Nature of Duties: _____					
Reason for Leaving: _____					
<b>Attach additional sheet of paper if necessary to report experience adequately or if you wish to include volunteer work experience.</b>					

**D. REFERENCES  
(Relatives are not acceptable references)**

Name & Title	Occupation	Address	Phone
1.			
2.			
3.			
4.			

**CERTIFICATION:** I hereby certify that all the information I have provided on BOTH SIDES of this application form is true, complete and correct to the best of my knowledge and belief, and is made in good faith. I agree and understand that all statements made by me are subject to being investigated for verification. I further agree and understand that any omissions or misstatement of facts contained in this application may disqualify me for any employment or result in my removal from employment with the City of Kettering.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**EQUAL OPPORTUNITY EMPLOYER**

As an Equal Opportunity Employer, the City of Kettering is committed to give equal consideration to all applicants without regard to race, color, religion, gender, age, national origin, ethnic heritage, or disability.



CITY OF KETTERING

BACKGROUND RELEASE FORM

PLEASE PRINT CLEARLY

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ CONTACT PHONE #: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_  PLEASE CHECK IF YOU ARE UNDER THE AGE OF 18

DRIVER'S LICENSE #: \_\_\_\_\_ STATE\*: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

\*Applicants with out-of-state driver's licenses must provide a copy of a current driving record prior to employment.

VALID LICENSE:  YES  NO TYPE OF LICENSE:  OPERATOR'S  COMMERCIAL (CDL)

I authorize the City of Kettering and any investigative or credit agency of its choice, to investigate my personal history, character and general reputation as it substantially relates to the duties and responsibilities of the position for which I am applying, which may include my driving, safety inspection, arrest, conviction, financial and credit record, verification of my education and employment history, a social media search, a fingerprint background check and a search of any public record available. These reports may be obtained at any time after receipt of my authorization and, if hired, throughout my employment with the City of Kettering.

I authorize any reference, school, former employer, military organization, police department, or other person or agency to disclose to the City of Kettering or its agent, upon request, any information or records they may have about me and I release them from all liability for disclosing such information to the City of Kettering.

I authorize the City of Kettering to obtain or cause to be prepared a consumer report or an investigative consumer report, which may include information as to my financial and credit history, character, general reputation, personal characteristics or mode of living, in connection with my application for employment.

\_\_\_\_\_  
Applicant Signature Date

\_\_\_\_\_  
Parent/Guardian Signature if Applicant is under 18 years of age Date

Internal Use Only

DATE: \_\_\_\_\_ BACKGROUND NEEDED BY DATE: \_\_\_\_\_ EXPECTED HIRE DATE: \_\_\_\_\_

DEPT: \_\_\_\_\_ POSITION \_\_\_\_\_ HIRING SUPERVISOR: \_\_\_\_\_

BACKGROUND CHECK LEVEL:

FT  PT  TEMP  CDL  PS  PPVF  VOL  CREDIT  STATE FINGERPRINT  FED FINGERPRINT

Credit check - Positions with access to sensitive financial or personal data or at discretion of HR or Finance Dir.

State fingerprint - Positions with unsupervised direct access to vulnerable populations (minors/seniors).

Fed. fingerprint - FF, PPVF, Police, Dept. Directors and/or candidates who have not lived in OH for the past 5 yrs.

\*All background check requirements may be modified at the discretion of the Human Resources Department.

OTHER OR NOTES \_\_\_\_\_

BACKGROUND COMPLETED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

Approved

On Hold- Please contact HR Dept.

Not Recommended for Hire

HR DEPT.: \_\_\_\_\_ DATE: \_\_\_\_\_



CITY OF KETTERING

## EQUAL EMPLOYMENT OPPORTUNITY STATISTICAL SUPPLEMENT

Applicants for employment are requested, but not required, to provide the following supplementary data. Availability of this data assists in the maintenance of an Equal Employment Opportunity Program. Please DO NOT place your name on this form. THIS FORM IS VOLUNTARY AND DOES NOT AFFECT YOUR EMPLOYMENT STATUS.

<p>1. Position: <u>Seasonal Groundskeeper</u></p> <p>Full-time ___ Part-time ___ Temporary <u>x</u> ___</p>	<p>2. Date of Application:</p> <p>_____/_____/_____ month      day      year</p>
<p>3. Race or Ethnic Origin:</p> <p>White ___ Black ___ Hispanic ___</p> <p>Asian ___ American Indian ___ Other ___</p>	<p>4. Sex:</p> <p>M ___ F ___</p>

**PLEASE RETURN TO:**

**PLEASE DO NOT PLACE YOUR NAME ON THIS FORM.**

City of Kettering  
Human Resource Department  
3600 Shroyer Road, Kettering, OH 45429  
FAX: 937-296-3371