

Operations Administration
930 West Fourth Street
Bloomington, IN 47402
Phone (812)349-3498
Fax (812)349-3744

Parks & Recreation Main Office
401 North Morton Street
Bloomington, IN 47404
Phone (812)349-3700
Fax (812)349-3705



OPERATIONS DIVISION

Application for Temporary/Seasonal Employment

PERSONAL INFORMATION				
Name _____				
<i>Last</i>	<i>First</i>	<i>Middle</i>		
Address _____				
<i>Number</i>	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
Telephone Number _____		Email _____		
Present Occupation _____		Employer's Name & Phone _____		
Date Available to Begin Work ____/____/____				

EDUCATION			
High School (or G.E.D.) _____	Graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Name</i>			
Vocational School _____	Graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Name</i>			
College _____	Graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<i>Name</i>			

EMPLOYMENT HISTORY				
DATES EMPLOYED	ORGANIZATION	POSITION	SUPERVISOR	PHONE NUMBER
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

APPLICABLE EXPERIENCE, KNOWLEDGE, TRAINING, AND JOB SKILLS

CHARACTER REFERENCES (*Other than relatives and past employers*)

Name	Relationship	Phone Number
_____	_____	_____
_____	_____	_____

OTHER INFORMATION

Have you ever been convicted of *or* are you currently charged with any crime or has your driver's License been suspended? (A current charge or conviction will not necessarily disqualify an applicant from employment.) Yes No

Are you prevented from lawfully becoming employed in the U.S.? Yes No
Please explain: _____

Do you have a valid Driver's License? Yes No

Do you have a valid CDL License? Yes No

Do you have a reliable means to get to work? Yes No

LIST SPECIFIC POSITION(S) DESIRED AS TITLED ON THE JOB DESCRIPTION

(1) _____

(2) _____

(3) _____

ACKNOWLEDGEMENT

I hereby certify that all of the above questions are fully, correctly, and truthfully answered and I authorize this employer to contact my former employers, references, and other sources in order to verify the facts furnished regarding my character and qualifications. I understand that the job(s) for which I am applying may be subject to a criminal history check. I hereby release any such employer or persons liability of any nature on account of furnishing such information. I understand that any misleading, incorrect, or untruthful statements may render this application void; and if I am employed, would be just cause for termination of my employment.

Name (print) Signature Date

NOTE: You will be contacted ONLY if selected for an interview.

STAFF USE



Voluntary Affirmative Action Information Survey City of Bloomington

We are an Equal Opportunity Employer Answering the following questions will help us meet our recording requirements for the Equal Employment Opportunity Commission and our Affirmative Action Program. This information is used for statistical purposes only, and is kept confidential. Voluntary Affirmative Action Surveys are separated from the application before being reviewed by the Department that is hiring. *The managers making the hiring decisions do not have access to this information.*

It is the City of Bloomington's policy to encourage and support equal employment opportunities for all applicants and employees without regard to race, color, ancestry, sex, religious creed, national origin, physical disability, mental disability, medical condition, age, marital status, political affiliation, sexual orientation, housing status, or disabled veteran or Vietnam era veteran status. Employment decisions will be evaluated on the basis of an individual's skills, knowledge, abilities, job performance and other legitimate qualifications. Thank you for helping us maintain accurate records for the Affirmative Action Program.

Name: _____

Date: _____ **Zip code (home):** _____

Position Applied For: _____

Date of Birth: _____ **Age:** _____ **Gender:** MALE FEMALE

Where did you learn of the Job Vacancy? (Select all that apply):

- Unemployment Office Word of Mouth Internet/ Web page
- City Job Posting Bulletin Board Newspaper _____ Other _____

Ethnicity (please select all that apply):

- Black/African-American American Indian/Alaskan Native Asian
- Hispanic/Latino White (non-Hispanic) Native Hawaiian/Other Pacific Islander
- Other _____

Are you disabled?* Yes No

Are you a disabled veteran? *** Yes No

Are you a Vietnam-era veteran? ** Yes No

Are you an "other veteran"? **** Yes No

*Under the American with Disabilities Act (ADA), "an individual with a disability is a person who: 1) physical or mental impairment that substantially limits one or more major life activities, 2) has a record of such impairment or 3) is regarded as having such as an impairment."

** A Vietnam-era veteran is defined as a person who served on active duty for more than 180 days, any part of which occurred during the period August 5, 1964 to May 7, 1975.

*** A disabled veteran is defined as a person who is entitled to compensation under the laws administered by the Veterans Administration for disability, or whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

****An "other veteran" is defined as a person who served on active duty during a war or in a campaign or expedition for which a campaign badge, a service medal, or an expeditionary medal has been authorized. "War" includes veterans with active duty service between December 7, 1941 and April 28, 1952, officially designated as World War II. Active duty veterans of Korea, Vietnam, Desert Shield/Storm and other campaigns or expeditions are included because those actions were designated with a campaign badge or medal.

CITY OF BLOOMINGTON BACKGROUND CHECK AUTHORIZATION

****** All information must be legible ******

I hereby authorize the City of Bloomington to conduct criminal background checks to determine my eligibility for employment or continued employment.

I understand that the City is asking for my date of birth, previous names and previous addresses only in order to conduct background checks and for no other reason.

By signing below, I hereby authorize the City of Bloomington to conduct background checks on me. I hereby release the City of Bloomington from any liability related to the procurement and/or disclosure of any information provided by me or obtained about me in connection with my application for employment with the City of Bloomington. I understand that any information gathered as a result of background checks will be kept confidential. I make this waiver knowingly and voluntarily.

Applicant's signature

Date

Printed name

other names used (if applicable)

Date of Birth

Social Security Number

Current address (include city, state and zip code)

Previous Address if current address is less than 1 year
(include city, state, and zip code)

Office Use Only:

Program/Area _____

Supervisor _____