



3950 Adams Avenue South Ogden, UT 84403

(801) 622-2727

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

If you have a disability and believe you require accommodation for disability during the selection process, please contact us to make appropriate arrangements.

INSTRUCTIONS: THIS APPLICATION IS PART OF THE EXAMINATION PROCESS. TYPE OR PRINT CLEARLY. ANSWER ALL QUESTIONS COMPLETELY AND CORRECTLY.

Position Applied For _____

Department: _____

Date: _____

Name: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Telephone: _____

Are you a current South Ogden employee? Yes No If Yes, what department _____

We participate in the Utah Retirement System. Are you currently receiving a retirement benefit from URS? Yes No

EDUCATION RECORD

Did you graduate from high school or receive a GED certificate? Yes No

School Name	Location	Hours Earned	Diploma, Degree or Certificate	Major Field of Study
High School		N/A		General Studies
Business/Technical/Vocational				
College/University (Undergraduate)				
1.				
2.				
3.				

For positions which require high school graduation or GED, or a college degree, a copy of the high school diploma/GED certificate or college diploma may be required.



LICENSES (Optional, unless required for the position for which you are now applying.)

List driver's license and other current licenses, certificates, or registrations required for the position for which you are applying. Indicate types, state license numbers and expiration dates.

List any special skills you possess and/or equipment or office machines you can operate.

LANGUAGE (other than English) in which you can clearly communicate.

Language: _____ Speak: _____ Read: _____ Write: _____

OTHER INFORMATION

If you are not a current South Ogden employee, have you previously worked for South Ogden?

Yes No If so when? _____

Is a relative of yours currently employed by the South Ogden City? Yes No Name _____

During the last ten years, have you been convicted of, pled guilty or nolo contendere to, or been granted deferred adjudication for a felony or any lessor crime which may be directly related to your qualifications for this job? (Example: Conviction for reckless driving may not be related to your qualifications for a clerical position in the public works departments, but could be related to your qualifications for a road maintenance worker.) Yes No

If yes, list all such offenses and state date, name of court, and disposition.

ACKNOWLEDGEMENTS

Please **READ ALL** of the following statements and **INITIAL EACH** of the boxes to indicate you have read and understood each of the statements. If you have questions, contact South Ogden City Employment Office.

Following an offer of employment, you will be required to submit verification of your legal right to work in the United States.

All offers of employment and all information regarding compensation and other terms and conditions of employment will be made in writing.

Employment will be **at will** unless specifically stated to be otherwise. **"At will"** means South Ogden City has no obligation to continue your employment in the future.

This application is the property of South Ogden City and will become part of the personnel file if hired.



EMPLOYMENT HISTORY

Instructions: Be specific and complete. The information provided will be used to determine if you meet the minimum qualifications and, if an examination is required, whether you will be admitted. Provide information regarding all paid, military, and volunteer work which may be related to the position for which you are applying. Describe your most recent position first; then list other relevant positions in order, working down from the most recent. Use a separate block for each position even if it is with the same organization. Use additional sheets if necessary. **Do NOT** use references such as “**See Resume**” in place of completing this section.

May we contact all employers listed? Yes No (Attach a list of any exceptions with an explanation.)

Present Employer: _____ Present Position: _____
Address: _____ From (Mo./Yr.) _____ To(Mo./Yr.) _____
City, State, Zip: _____ Full-Time (30+hrs./wk.) Part-Time (<30 hrs./wk.)
Telephone: _____ Supervisor's Name/Title: _____ Salary: _____
Related Duties: _____
Reason for Leaving: _____

Previous Employer: _____ Previous Position: _____
Address: _____ From (Mo./Yr.) _____ To(Mo./Yr.) _____
City, State, Zip: _____ Full-Time (30+hrs./wk.) Part-Time (<30 hrs./wk.)
Telephone: _____ Supervisor's Name/Title: _____ Salary: _____
Related Duties: _____
Reason for Leaving: _____

Previous Employer: _____ Previous Position: _____
Address: _____ From (Mo./Yr.) _____ To(Mo./Yr.) _____
City, State, Zip: _____ Full-Time (30+hrs./wk.) Part-Time (<30 hrs./wk.)
Telephone: _____ Supervisor's Name/Title: _____ Salary: _____
Related Duties: _____
Reason for Leaving: _____



Previous Employer: _____ Previous Position: _____
Address: _____ From (Mo./Yr.) _____ To(Mo./Yr.) _____
City, State, Zip: _____ Full-Time (30+hrs./wk.) Part-Time (<30 hrs./wk.)
Telephone: _____ Supervisor's Name/Title: _____
_____ Salary: _____
Related Duties: _____
Reason for Leaving: _____

Previous Employer: _____ Previous Position: _____
Address: _____ From (Mo./Yr.) _____ To(Mo./Yr.) _____
City, State, Zip: _____ Full-Time (30+hrs./wk.) Part-Time (<30 hrs./wk.)
Telephone: _____ Supervisor's Name/Title: _____ Salary: _____
Related Duties: _____
Reason for Leaving: _____

I understand that an investigation may be made in which information is gathered regarding my character, previous employment, education background, criminal history and other qualifications for employment with South Ogden City. I authorize anyone possessing this information to furnish it to South Ogden City upon request, and I release South Ogden City and all persons, firms or organizations furnishing such information from all liability and damages whatsoever in furnishing, obtaining or using said information.

I certify that all statements are true to the best of my knowledge, and I agree and understand that any misstatements or omissions of material facts on my part may forfeit my participation in the selection process and/or my right to employment, even if discovered after I have become an employee of South Ogden City.

Signature of Applicant: _____ **Date:** _____
(By typing my name I agree to the above statement)



Notice to Applicant and Release of Claims

South Ogden City has a vital interest in maintaining safe, healthy, and efficient working conditions for its customers, clients, and employees. Using or being under the influence of drugs and/or alcohol on the job may pose serious safety and health risks not only for the user, but to the public and to all those who work with the user. The possession, use, or sale of illegal drugs or controlled substances may pose unacceptable risks to safe, healthy and efficient operations.

To meet this compelling interest, individuals who wish to be considered for employment must agree to **PRE-PLACEMENT DRUG AND ALCOHOL TESTING AS A CONDITION OF AN OFFER OF EMPLOYMENT**, by completing and signing this notice and the attached employment application as provided for in South Ogden City’s Pre-Placement Drug and Alcohol Testing Policy.

The APPLICANT understands and agrees to release South Ogden City and its supervisors, managers, directors, officers, agents, employees, parents, subsidiaries, and affiliated concerns from any and all liability, claims, demands, damages, and causes of action of every kind and nature arising out of or resulting from or in connection with submitting to drug and alcohol testing an any decision concerning employment made by South Ogden City in whole or in part, based upon the results of drug and alcohol testing.

APPLICANTS UNWILLING TO SIGN THIS NOTICE SHALL NOT BE CONSIDERED FURTHER FOR EMPLOYMENT BY THE CITY. ANY APPLICANT WHO FAILS A PRE-PLACEMENT DRUG AND ALCOHOL TEST SHALL NOT BE CONSIDERED FURTHER FOR EMPLOYMENT BY THE CITY FOR A PERIOD OF SIX MONTHS.

I have read this document and agree to Pre-Placement Drug and Alcohol Testing and agree to release the City from liability as described above.

Applicant’s Name

Applicant’s Signature
(By typing my name I agree to the above statement)

Date