CITY OF WINTHROP POOL APPLICATION

The City of Winthrop is an Equal Opportunity Employer

Applications are considered for all positions without regard to age, race, color, religion, sex, national origin, or disability. Please return to: City of Winthrop, 354 W Madison, P.O. Box 98, Winthrop, IA 50682

Full Name:			Date:		
L	Last First		M.I.		
Address:					
Stre	eet Address			Ара	artment/Unit #
City			State	Zip	Code
Phone:	Emai	il	Soc. S	ecurity#	
Position Applie	ed For:		Date Available:		
fyou are emp	loyed and are under the	age of 17 years old	and the first state of the stat		Yes No
i you are emp	ioyed and are under the	Yes No	, can you turnish a work	permit	[] Or []
	been convicted of a crin	Yes No	•		
Have you ever	•	Yes No me?[]or[]If	yes, please explain		
Have you ever	been convicted of a crin	Yes No me? [] or [] If application from employ CERTIFICATIONS A	yes, please explain		
Have you ever	been convicted of a crin	Yes No me? [] or [] If application from employ CERTIFICATIONS A	yes, please explain yment) ND TRAINING Date of Training		
Have you ever	been convicted of a crin	Yes No me? [] or [] If application from employ CERTIFICATIONS A	yes, please explain vment) ND TRAINING Date of Training		Expiration
CONVICTION DOES TO	been convicted of a crin	Yes No me? [] or [] If application from employ CERTIFICATIONS A	yes, please explain yment) ND TRAINING Date of Training		Expiration
CPR:	been convicted of a crin	Yes No me? [] or [] If application from employ CERTIFICATIONS A	yes, please explain yment) ND TRAINING Date of Training		Expiration

PLEASE ATTACH A PHOTOCOPY OF THE FRONT AND BACK OF ALL YOUR CURRENT CERTFICATION CARDS TO THIS APPLICATION.

PREVIOUS EMPLOYMENT

Company:	Phone:	
Job Duties:		
May we contact your supervisor for a refer	Yes No rence? [] or []	
Company:	Phone:	
Job Duties:		·
May we contact your supervisor for a refer	Yes No rence? [] or []	
REFERENCI	ES (please list two-other than family)	
Name:	Name:	·
Address:	Address:	
Phone:	Phone:	
Yes No Are you a U.S. Veteran? [] or [] Date Those wishing to claim Veteran's Preference		То
D	ISCLAIMER AND SIGNATURE	
I understand that completing this application may be rejected for any reason	on does not constitute an offer of employ	yment and that my
I certify that my answers are true and comstatements contained in this application fo decision.		<u>-</u>
If this application leads to employment, I u interview may result in my release, regard	_	• • •
That this employment application and any employment and that this organization follows voluntarily leave employment upon p and for any reason.	lows an "employment at will" policy that	an individual who is hired
I understand that I am required to follow a	II rules and regulations of the City of Win	throp.
Signature:	Date:	