



# City of Alma

## Application for Employment

525 E. Superior St.  
Alma, MI 48801  
(989)463-9505  
www.myalma.org

### Personal Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ Other Phone: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Driver's License: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Do you have a valid Commercial Drivers License? Yes No Endorsements: \_\_\_\_\_

U.S. Citizen? Yes No If no, do you have a valid work permit? Yes No

### Position Applying For

Title: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Available to work (please check all that apply): Full time Part-time Temporary

If available for part-time, indicate days and times desired: \_\_\_\_\_

Have you ever worked for the City of Alma before? Yes No Department: \_\_\_\_\_

Would working Saturdays, Sundays or holidays present a problem for you? Yes No

Please list any experiences, special training, or qualifications you have for the positions for which you are applying:

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The City of Alma is an equal opportunity employer and selects the best matched individuals for the job based upon job related qualifications, regardless of race, creed, color, sex, age, height, weight, national origin, marital status or handicap.

Are you able to perform the functions listed on the job description of the job for which you are applying, with or without reasonable accommodation? Yes      No

If reasonable accommodation is required, please detail:

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Are you a veteran? Yes No If yes, which brand of service? \_\_\_\_\_

Dates of Duty: \_\_\_\_\_ Rank at Discharge: \_\_\_\_\_

Reasons for any discharge other than honorable:

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**Record of Education:**

<u>School:</u>	<u>Name and Location of School</u>	<u>Course of Study</u>	<u>Number of Years?</u>	<u>Graduate?</u>	<u>List Degree or Diploma</u>
High School	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
Other (Specify)	_____	_____	_____	_____	_____

List any licenses or professional certification you have earned: \_\_\_\_\_

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**Office Equipment**

Typewriter- wpm: \_\_\_\_\_ Calculator: \_\_\_\_\_

Word processing: \_\_\_\_\_ Spreadsheet: \_\_\_\_\_

Computerized Drafting: \_\_\_\_\_ Presentation Graphics: \_\_\_\_\_

Other: \_\_\_\_\_

**Machinery**

Bus: \_\_\_\_\_ Sewer vacuum: \_\_\_\_\_

Dump truck: \_\_\_\_\_ Trucks with underbody blades: \_\_\_\_\_

Front end loader: \_\_\_\_\_ Street sweeper: \_\_\_\_\_

Backhoe: \_\_\_\_\_ Other: \_\_\_\_\_

**List below all present and past employment, beginning with your most recent employer  
(Add more pages if necessary)**

**1. Company Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Dates of employment:**  
**City, State:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_  
**Nature of business:** \_\_\_\_\_ **Starting wage:** \_\_\_\_\_  
\_\_\_\_\_ **Ending wage:** \_\_\_\_\_  
**Name of supervisor:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_

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**2. Company Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Dates of employment:**  
**City, State:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_  
**Nature of business:** \_\_\_\_\_ **Starting wage:** \_\_\_\_\_  
\_\_\_\_\_ **Ending wage:** \_\_\_\_\_  
**Name of supervisor:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_

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**3. Company Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Dates of employment:**  
**City, State:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_  
**Nature of business:** \_\_\_\_\_ **Starting wage:** \_\_\_\_\_  
\_\_\_\_\_ **Ending wage:** \_\_\_\_\_  
**Name of supervisor:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_

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**4. Company Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Dates of employment:**  
**City, State:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_  
**Nature of business:** \_\_\_\_\_ **Starting wage:** \_\_\_\_\_  
\_\_\_\_\_ **Ending wage:** \_\_\_\_\_  
**Name of supervisor:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_

**We may contact the employers listed above unless  
you indicate those you do not want us to contact  
and the reason you wish us not to contact them:** \_\_\_\_\_  
\_\_\_\_\_

**Personal References**

Do not give former employers or relatives

**1 Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Their association to you:** \_\_\_\_\_

**2 Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Their association to you:** \_\_\_\_\_

**3 Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Their association to you:** \_\_\_\_\_

**Name used in previous employment if different from that given on the application:**

\_\_\_\_\_

**List any membership in professional (not Labor) associations:**

\_\_\_\_\_

**List hobbies or special interests:**

\_\_\_\_\_

**Agreement**

(Please read the following statements carefully)

I hereby certify that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

Municipal service, may at times, make the following conditions mandatory: overtime, shift-work, a rotating work schedule, emergency call-in, or a work schedule other than Monday through Friday. I understand and accept these conditions of my continuing employment.

I authorize persons, schools, current and previous employers, police agencies and other organizations to provide any relevant information concerning myself that may be required to arrive at an employment decision.

I understand that if I am employed, such employment is for no definite period of time and that the City of Alma can change wages, benefits and conditions at any time.

I have read and understand the above.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_