



City of Miami
 Human Resources Division
 PO Box 1288 [129 5th Avenue NW]
 Miami, OK 74355-1288
 918.542.6685

Application for Employment

Position applied for: _____

Date: _____

Please completely fill out the following form. [PLEASE PRINT]

Name: _____ Email address: _____
 LAST / FIRST / MIDDLE

Address: _____ Phone #1: [] _____

City: _____ State: _____ Zip Code: _____ Phone #2: [] _____

How did you hear about this position? _____

Have you read the job requirements for this position? YES [] NO [] If yes, can you perform the essential functions of the position for which you are applying? YES [] NO [] If NO, please explain. _____

Are you legally eligible to be employed in the United States? YES [] NO []

Will sponsorship be required? YES [] No []

Are you over the age of 18 years? YES [] NO [] (If no, you may be required to provide authorization to work.)

Have you ever been convicted of a felony or a misdemeanor, or received a deferred judgment or any other probationary disposition for a felony or misdemeanor? YES [] NO [] If YES, please explain below:
 (A conviction will not necessarily result in the denial of employment.)

Have you ever worked for this City before? YES [] NO [] If YES, when [give dates]? _____

Department / Supervisor / Job Title: _____

Are you available to work: DAYS [] NIGHTS [] WEEKENDS [] FULL TIME [] ON CALL [] 10 HOUR DAYS []
 Check all that would apply.

Are you presently employed? NO [] YES [] If YES, why are you considering leaving?

If YES, may we contact your CURRENT employer[s]? YES [] NO []

EMPLOYMENT HISTORY

LIST your last three [3] employers [beginning with your present or most recent], include military experience.
 EXPLAIN any gaps in employment in comments section below.

Employer	Telephone	Dates Employed		Summarize the nature of the work performed and job responsibilities:
		From	To	
Address				
Job Title		Hourly Rate		
		Starting		
Immediate Supervisor & Title		\$	Per	
Reason for Leaving		Hourly Rate		
		Final		
May we contact for reference <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Later		\$	Per	

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May we contact for reference <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Later		\$	Per	

Comments [including explanation of any gaps in employment]: _____

Skills & Qualifications: Summarize special skills/qualifications acquired from employment or other experiences that may qualify you for work with this organization.

EDUCATION

	Name and Location of School	Course of Study	# of Years Completed	Diploma or Degree Received
High School				
College				
Vocational or Trade School				
Graduate Work				

Have you completed any special courses, seminars and/or training that would enable you to perform the position for which you are applying? NO [] YES [] If YES, please describe:

REFERENCES

List name and telephone number of three business/work references who are not related to you. If not applicable, list three non-work references who are not related to you.

Full Name of Reference	Relationship	Telephone / contact information	Years Known

List any additional information / comments you would like us to consider: _____

Employment Application Disclaimer and Acknowledgement

By initialing, I understand and acknowledge the following:

- _____ The City of Miami is an equal opportunity employer, except as specifically noted in job classifications for which certain laws may provide other rights. Applicants will receive consideration for positions, without regard to race, color, religion, age, sex, sexual orientation, marital status, disabilities, veteran status and any other segmenting factor protected by federal, state or local law.
- _____ I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify or provide misleading information is grounds for refusing to hire me, or for discharge should I be hired.
- _____ I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.
- _____ In consideration for my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option and without prior notice to me.
- _____ I acknowledge that the City of Miami is an At-Will employer, except as specifically noted in job classifications for which certain laws may provide other rights, that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself.
- _____ I understand that upon a conditional job offer made by the City of Miami, a pre-employment drug test, a complete background check, and a pre-employment physical will be required.
- _____ I understand that no representative of the City of Miami, other than the City Manager, has any authority to enter into any agreement for employment for any specified period of time, or to assure or make some other personnel move, either prior to commencement of employment or after I have become employed, or to assure any benefits or terms and conditions of employment, or to make any agreement, that is contrary to the foregoing.

THE CITY OF MIAMI IS AN EQUAL OPPORTUNITY EMPLOYER

Signature of Applicant

Print name of Applicant

Date