



Employment Application
An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, pregnancy, childbirth, pregnancy/childbirth related medical conditions, age, or disability or any other protected class. It is our intention that all qualified applicants are given equal opportunity and that selection decisions are based on job-related factors. If you need an accommodation to complete the application process contact City Hall at 502-722-8110.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email: _____

Position Applied for: _____ Date Available: _____

Have you ever worked for this city? YES NO If yes, when? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you receive a diploma? YES NO

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Professional References (please list three)

Full Name: _____ Relationship: _____

Employer: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Employer: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Employer: _____ Phone: _____

Address: _____

Previous Employment

Employer: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Employer: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Employer: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service (Police Only)

Branch: _____ From: _____ To: _____
Rank at Discharge: _____ Type of Discharge: _____
If other than honorable, explain: _____

Disclaimer and Signature

I understand that neither this document nor any verbal promises made by the employer or representative employee may be constituted as an employment contract.

I understand and acknowledge that, unless otherwise defined by law, policies and procedures, or rules and regulations, any employment relationship with the City is of an "at-will" nature, which means that either the employer or the employee may terminate the employment relationship at any time, with or without cause or advance notice.

I understand that before beginning employment I must pass a pre-employment drug test and any other applicable testing for the position.

I understand that this application is the property of the employing City. This application must be signed and dated below before I will receive consideration for employment.

I have read, understand, and by my signature consent to these statements.

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

If this application leads to employment, I understand that false or misleading information given in my application or interview(s) may result in my release.

Signature: _____ Date: _____