



**Town of Parker**  
 1314 - 11<sup>th</sup> Street Parker, AZ 85344  
 Phone: (928)669-9265 Fax: (928)669-5247



**APPLICATION FOR EMPLOYMENT**

**EQUAL OPPORTUNITY/ REASONABLE ACCOMMODATION EMPLOYER**

Anyone requiring assistance in completing the application form may request assistance from Human Resources.

The Town of Parker considers applicants for all positions without regard to the applicant's legally protected status, including, without limitation, the applicant's race, color, religion, creed, gender, national origin, tribal affiliation, age, disability, marital status, veteran status, or any other legally recognized basis under federal, state, or local law.

Applicants with disabilities may be entitled to reasonable accommodation under the Americans with Disabilities Act and certain state or local laws. Please inform Human Resources if you need assistance completing this application or to otherwise participate in the application process.

(PLEASE TYPE OR PRINT LEGIBLY)

<b>Position Applied For:</b>		<b>Date of Application:</b>	
<b>How did you learn about us?</b> <input type="checkbox"/> Social Media <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative/Friend <input type="checkbox"/> Website <input type="checkbox"/> Other			
<b>Last Name:</b>	<b>First Name:</b>	<b>MI:</b>	
<b>Address</b>			
<i>(Street, PO Box, City, State, Zip):</i>			
<b>Phone:</b>		<b>Email:</b>	
<b>Valid Driver's License Number:</b>		<b>Issuing State:</b>	

*All requested information must be furnished. The information you provide will determine whether you are eligible for the position or further examination process. All information contained in this application is subject to verification. Any omission, misstatement or falsification may be cause for rejection of this application, removal of your name from an eligibility list, or termination from Town service. Applications are accepted for review only when positions are open.*

**Are you under 18 years of age?** \_\_\_NO \_\_\_YES \_\_\_ If NO, can you provide required proof of your authorization to work? \_\_\_\_\_

**Have you ever filed an application with the Town of Parker before?** \_\_\_NO \_\_\_YES, when? \_\_\_\_\_

**Have you ever been employed with the Town of Parker?** \_\_\_NO \_\_\_YES, when? \_\_\_\_\_

**Are you related to any Town of Parker employee?** \_\_\_NO \_\_\_YES, who? \_\_\_\_\_

**Are you currently employed?** \_\_\_NO \_\_\_YES

Have you ever been terminated or forced to resign due to misconduct or unsatisfactory service? \_\_\_NO \_\_\_YES

If YES, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If hired, can you furnish proof that you are eligible to work in the United States? \_\_\_NO \_\_\_YES

If NO, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you able to perform the “essential functions” of the job for which you are applying with or without reasonable accommodations? \_\_\_NO \_\_\_YES

Date available for work: \_\_\_\_\_ Desired salary range: \_\_\_\_\_

Are you available to work full time, part time, or temporary? (Part time/temporary, please specify days/dates below)

\_\_\_\_\_  
\_\_\_\_\_

Are you currently on “lay-off” status or subject to recall? \_\_\_NO \_\_\_YES, if YES please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Since your 18<sup>th</sup> birthday, have you been convicted (found guilty, plead guilty, plead no contest) of any criminal offense? \_\_\_NO \_\_\_YES, a YES answer does not automatically disqualify you from employment since the nature of the offense, date, and type of job for which you are applying will be considered. The information you fill out will be verified, it is essential that you be truthful and honest. This includes any misdemeanors and felonies (i.e. assault, burglary, disorderly conduct, domestic violence, drug related convictions, driving under the influence, driving while intoxicated, failure to appear in court, larceny, shoplifting, trespassing, etc.). Such convictions may have resulted in a fine(s), community service, probation, or jail/prison time.**

If YES, please list offense(s) and date(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION, TRAINING, AND SKILLS**

SCHOOL	LOCATION	COURSE OF STUDY	NUMBER OF YEARS COMPLETED	DIPLOMA/ DEGREE
HIGH SCHOOL				
UNDERGRADUATE				
GRADUATE/PROFESSIONAL				
OTHER (SPECIFY)				

**ADDITIONAL QUALIFICATIONS**

List additional knowledge, skills, qualifications, publications, certificates, or awards that will be helpful in consideration of your application for employment

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**OFFICE AND CLERICAL SKILLS (Required skills will be tested.)**

Typing words per minute: \_\_\_\_\_ Shorthand words per minute: \_\_\_\_\_ Data entry speed: \_\_\_\_\_

Word processing? \_\_\_NO \_\_\_YES Filing? \_\_\_NO \_\_\_YES

**Computer Skills:** List the computer/hardware/software programs with which you are proficient:

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**PERSONAL OR PROFESSIONAL REFERENCES** PLEASE DO NOT INCLUDE FAMILY MEMBERS OR PAST SUPERVISORS

NAME/ ADDRESS	PHONE	OCCUPATION

**POLICE POSITIONS ONLY**

Are you a citizen of the United States of America? \_\_\_NO \_\_\_YES

Are you 21 years of age or older? \_\_\_NO \_\_\_YES

Are you P.O.S.T. Certified? \_\_\_NO \_\_\_YES

## EMPLOYMENT HISTORY

Show complete experience in each position beginning with your current or last position, including military and volunteer experience. A resume may be attached, but will not be accepted in lieu of completing the employment record. Be sure to list each significant change in title separately, even with the same employer.

CURRENT EMPLOYER	PHONE NUMBER
MAILING ADDRESS	
JOB TITLE	STARTING/ ENDING SALARY
SUPERVISOR	REASON FOR LEAVING
MAY WE CONTACT? ___ NO ___ YES	DATES EMPLOYED
WORK PERFORMED	
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PREVIOUS EMPLOYER	PHONE NUMBER
MAILING ADDRESS	
JOB TITLE	STARTING/ ENDING SALARY
SUPERVISOR	REASON FOR LEAVING
MAY WE CONTACT? ___ NO ___ YES	DATES EMPLOYED
WORK PERFORMED	
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**EMPLOYMENT HISTORY . . . continued**

<b>PREVIOUS EMPLOYER</b>	<b>PHONE NUMBER</b>
<b>MAILING ADDRESS</b>	
<b>JOB TITLE</b>	<b>STARTING/ ENDING SALARY</b>
<b>SUPERVISOR</b>	<b>REASON FOR LEAVING</b>
<b>MAY WE CONTACT?</b> ___ NO ___ YES	<b>DATES EMPLOYED</b>
<b>WORK PERFORMED</b>	
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<b>PREVIOUS EMPLOYER</b>	<b>PHONE NUMBER</b>
<b>MAILING ADDRESS</b>	
<b>JOB TITLE</b>	<b>STARTING/ ENDING SALARY</b>
<b>SUPERVISOR</b>	<b>REASON FOR LEAVING</b>
<b>MAY WE CONTACT?</b> ___ NO ___ YES	<b>DATES EMPLOYED</b>
<b>WORK PERFORMED</b>	
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**ADDITIONAL INFORMATION**

Is any additional information relative to change of name or nickname necessary to enable a check on your work and education records? \_\_\_NO \_\_\_YES, if YES please explain: \_\_\_\_\_

If hired, will you be able to work during the normal days and hours required for the position? \_\_\_NO, \_\_\_YES , if NO please explain:  
\_\_\_\_\_

Do you have any commitments to another employer that might affect your employment with the Town? \_\_\_NO \_\_\_YES, if YES please explain: \_\_\_\_\_

Do you have any experience from your military service that would be relevant to the job for which you are applying? \_\_\_N/A \_\_\_NO \_\_\_YES, if YES please explain: \_\_\_\_\_  
\_\_\_\_\_

Do you have any language abilities (such as reading or speaking a language other than English) that might help you perform the job for which you are applying? \_\_\_NO \_\_\_YES, if YES please explain: \_\_\_\_\_

**SELECTION PROCESS**

Applications will be reviewed and the most qualified applicants will be selected to be interviewed. An eligible list will be established from these interviews. If you are invited to a testing process and might require reasonable accommodation to participate, please advise the Human Resources Office at the time you are contacted. All applicants will be notified of their status by mail. Final selection will be made by the appropriate Department Head with approval of the Town Manager. Every effort will be made to process your application in a timely manner. The selection process ensures a very thorough review of all applications to determine those who meet the minimum requirements for this position. Due to the large number of applications received, the review and response to applications requires up to two weeks to complete.

**PLEASE NOTE**

- If an applicant requires "Reasonable Accommodation" in the testing process, the applicant must submit "Reasonable Accommodation Request Form" to the Human Resources Office after the job posting closing date and a minimum of 5 business days before the testing process begins.
- Applications must be signed and submitted to the Human Resources Office by 5:00PM on the closing date.
- Town Policy allows the hiring of relatives of current Town employees in the same department as the currently employed relative. However, relatives may NOT work for the same immediate supervisor if the relatives are located in the same work area/office.

**PRE-EMPLOYMENT REQUIREMENTS MAY INCLUDE:**

1. Approval of employment by Department Head and Town Manager.
2. Passing of Drug Screen.
3. Passing a scheduled physical examination paid for by the Town of Parker.
4. Successful completion of background investigation.
5. Provide official verification as to identity and work authorization.

**APPLICANT'S STATEMENT**

*Please read and initial each statement and sign below.*

- By signing this application, I certify that the answers given herein are true and complete to the best of my knowledge, and any omissions or misstatements of facts may be cause for rejection of this application or discharge from Town Service.
  
- I authorize the Town of Parker, or its designee, to make all necessary and appropriate investigations allowable by law of all statements contained in this application for employment, including but not limited to, a criminal history background check and fingerprinting check through local and federal law enforcement.
  
- I understand that it is my responsibility to advise the Town of Parker about any changes of address, phone number, or other contact information.
  
- I understand that this application for employment shall be considered active for a period of time not to exceed 90 days and I understand that if I wish to be considered for employment beyond this time period I should inquire as to whether or not applications are being accepted at that time.
  
- I understand that if I am offered a position, as a condition of beginning my employment, I may be required to undergo a physical examination and drug screen, and I hereby authorize any doctor, hospital, clinic, laboratory, or other medical facility to furnish any medical information with reference to me as may be necessary in conjunction with that examination, and/or related considerations of reasonable accommodation, fitness for duty, or as required by law.
  
- I understand that employment in a driving position is dependent upon a safe driving record, and authorize the Town of Parker to obtain an MVD report of my driving.
  
- If hired, I agree to comply with current Town of Parker Rules and Regulations and accept that the Town Council may make changes/ amendments any rules, regulations, or benefits in the future during the course of my employment. Nothing in the Town of Parker Rules and Regulations implies a contract of employment for a particular period of time.
  
- If hired, I do hereby agree to submit to any and all required drug and/or alcohol testing (as per the Town's Substance Abuse Policy) and to have test results reported to the Town of Parker. I release the Town of Parker from all liability in obtaining information pursuant to this release.
  
- If hired, I also agree to have my photograph taken for identification purposes.
  
- I authorize the Town of Parker to contact my current and former employers (unless I have answered NO to "May we contact") and the schools and references I have identified on this application for the purpose of verifying the information I have provided.
  
- I hereby release the Town of Parker including all employees, designees, from all liability as a result of inquiries based on information contained in my application or connected with the hiring process.

Signature of Applicant	Date