

Equal Opportunity Employer
 Each question must be fully and accurately answered. No action can be taken on this application until ALL questions are answered.



City of Charleston
 P.O. Box 2749
 Charleston, WV 25330

City of Charleston Employment Application

 Position(s) Applying For (Job Title):

Last Name	First Name	Middle Initial	Today's Date
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Present Street Address	City	State	Zip
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 If lived at present address for less than one year, list previous address including City, State and Zip

Home Telephone Number	Social Security Number
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Person to Notify In Case of Emergency	Telephone Number
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Street Address of Person To Notify In Case of Emergency	City	State	Zip
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Do you have a Driver's License?	? Yes ? No	State	License Number	Exp.
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Do you have a CDL?	? Yes ? No	State	License Number	Exp.
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Are you a citizen of the United States? ? Yes ? No

If no, can you furnish proof that you have the right to employment in the United States and can remain permanently in the country?
 ? Yes ? No

Will you accept employment: ? Full Time ? Part Time ? Shift Work ? Temp/Seasonal

Date Available To Start	Desired Minimum Salary
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Have you ever applied to the City of Charleston before? ? Yes ? No

If yes, please list date(s)	If yes, please list the position(s) applied for.
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What are your present plans (if any) for improving your education? _____

Subjects of special study or research work: _____

Describe special skills/abilities/typing speed/dictation speed: _____

Activities (Civic, Athletic, Etc.) Exclude organizations the name of which indicates race, creed, sex, age, marital status, color or national origin of its members.

MILITARY SERVICE

U.S. Military or Naval Service

Rank

Present membership in National Guard or reserves

EMPLOYMENT HISTORY

List below past and present employment (full-time, part-time and self-employment), beginning with your most recent position.

Present or most recent employer:

Company Name

Company Address

City

State

Zip

Company Phone

Supervisor

Position

? Full Time ? Part Time

Job Duties

Employed From-To (Month/Year)

Wage/Salary

May we contact? ? Yes ? No

Reason for leaving? _____
