

Date entered _____ / _____ / _____

Meets minimum qualifications Yes No Referred to department Yes No

Comments: _____

EDUCATION

Name of High School: _____

Location of School : _____
City and state

(Check one) **High School Diploma** **GED**

LICENSE(S) List all relevant certificates or Licenses (including valid driver's license).

Type of License:	License Number:	Expiration Date & State:	Granted by: (Licensing Board)

Job openings are posted at:

- www.willcoxcity.org
- Job Board in the City of Willcox Building,
101 S. Railroad Ave. Suite B.
Willcox, Az 85643

Each job posting has specific instructions on how, where and when to apply. This postings will specify:

- Document (s) required (application or resume, letters of reference, etc)
- Address to which the document(s) should be submitted
 - Application deadline or review date Failure to submit the requested information may result in elimination for consideration for the position.

You must submit separate application materials for each job, clearly specifying the Job Number and Title. Photocopied applications with signature and current are acceptable.

It is your responsibility to demonstrate through your application or resume how you meet the job qualifications; be sure to include employment dates and the specific duties you performed that relate to the position for which you performed that relate to the position for which you are applying.

All application materials must be received by **midnight of the closing date.**

Application materials are reviewed by the department. **The hiring department considers application materials submitted, selects candidates for interview and makes final hiring decisions.**

Job postings listed as " open until filled" will include a review date; and continue until the position is filled.

Application materials become official records of the City of Willcox and cannot be returned. Please make copies for your records before submitting.

This checklist is to ensure that my application materials are properly and processed for full consideration.

- Correct application materials are being submitted:
 - City of Willcox Application
 - Resume
 - Cover Letter
 - Letters or names of references
 - Other _____
- The Job Number is clearly noted on application materials, including resumes
- The application, if required, is complete, legible and signed.
- Application materials clearly reflect the relevant work experiences and job skills that demonstrate how I meet qualifications of the position .
- Application materials are being submitted via:
 - U.S. mail
 - Fax
 - In person
 - Drop box (Located outside of 101 S. Railroad Ave.)
 - E-mail ([www. city org. com](http://www.city.org.com))
- Application materials are being submitted prior to midnight of the closing date.
- Copies of application materials have been made for my records.

For Human Resources use only:

Closing date: ____/____/____

- Mail-in
- Walk-in
- Fax
- E-mail

Job # _____

DSN _____

Date entered ____/____/____

PROFESSIONAL REFERENCES

Please list up to three (3) current references who are familiar with your work-related abilities and background. Do not list relatives.

Professional

Name: _____ Address: _____ Number and Street Telephone (____) ____ - ____ ext. ____	Relationship: _____ _____ City State Zip E-mail: _____
Name: _____ Address: _____ Number and Street Telephone (____) ____ - ____ ext. ____	Professional relationship: _____ _____ City State Zip E-mail: _____
Name: _____ Address: _____ Number and Street Telephone (____) ____ - ____ ext. ____	Professional relationship: _____ _____ City State Zip E-mail: _____

EMPLOYEE HISTORY (This section must be completed)

Do not attach supporting documents such as resumes, letters of recommendation, performance evaluation, etc., unless specified in this position announcement, as they will not be evaluated or forwarded to the hiring department. Statements such as "See Resume" do not substitute for completing any portion of this application.

Beginning with your current or most recent job, list all relevant previous employers (including all the City of Willcox positions) and provide a complete description of duties. If applicable, include military and unpaid volunteer experience. Account for any gaps in employment in the Additional Information section on page 6. Please note that an offer of or continued employment may depend upon verification of education, skills and employment history.

____/____	to ____/____	_____ Employer's name (or COW department name)	_____ Job title
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Address: _____
 Number and Street City State Zip

Name of Supervisor: _____ **Telephone:** (____) ____ - ____ ext. ____

O.K. To contact ? Yes No **If not, why ?** _____

Number of employees you supervised: _____ **Annual salary: \$** _____ **Hours per week :** _____

Reason for leaving: _____

Job description :

_____/_____/_____ to ____/____/_____ _____
Mo./Yr. to Mo. Yr. Employer's name (or COW department name) Job title

Address: _____
 Number and Street City State Zip

Name of Supervisor: _____ **Telephone:** (____) ____-____ ext. _____

O.K. To contact ? Yes No **If not, why ?** _____

Number of employees you supervised: _____ **Annual salary: \$** _____ **Hours per week :** _____

Reason for leaving: _____

Job description :

_____/_____/_____ to ____/____/_____ _____
Mo./Yr. to Mo. Yr. Employer's name (or COW department name) Job title

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_____/_____/_____
Mo./Yr. to Mo. Yr. Employer's name (or COW department name) Job title

Address: _____
Number and Street City State Zip

Name of Supervisor: _____ Telephone: (____) ____-____ ext. _____

O.K. To contact ? Yes No If not, why ? _____

Number of employees you supervised: _____ Annual salary: \$ _____ Hours per week : _____

Reason for leaving: _____

Job description :

_____/_____/_____
Mo./Yr. to Mo. Yr. Employer's name (or COW department name) Job title

Address: _____
Number and Street City State Zip

Name of Supervisor: _____ Telephone: (____) ____-____ ext. _____

O.K. To contact ? Yes No If not, why ? _____

Number of employees you supervised: _____ Annual salary: \$ _____ Hours per week : _____

Reason for leaving: _____

Job description :

ADDITIONAL INFORMATION Please list any acquired skills, knowledge or experience you would like considered in assessing your qualifications for this position (such as volunteer work, vocational training, computer courses, software programming, office skills, foreign language skills/speed , research skills, computer skills etc.).

GENERAL INFORMATION

Are you legally authorized to work in the USA? _____

Are you under 18 years of age? _____

Are you a current City of Willcox employee? _____

Are you on an official layoff status with the City of Willcox? _____

Have you ever been convicted of (or plea bargained to) a FELONY conviction? _____

If yes, state the nature, resolution and date of the case(s):

SIGNATURE

I hereby certify that all information is true and complete to the best of my knowledge. I understand that employment in certain positions may be conditional upon a review of criminal records. I authorize the City of Willcox to request and obtain records to determine the accuracy of my responses. I agree to abide by all applicable City of Willcox Board of Regents rules, regulations and policies upon my acceptance of employment with the City. The overtime policy of the City of Willcox for nonexempt staff employees is to provide, at its discretion, either one and one half hours compensatory time off or additional pay at one and one half times the employee's regular rate of pay for each hour worked over forty hours in a workweek. The compensatory time off may be preserved, used and cashed out as provided by the Fair Labor Standards Act. I understand and agree to accept the above overtime policy as a condition of employment with the City of Willcox. My decision to accept the overtime policy is made knowingly, voluntarily and without coercion by the City of Willcox, or any employee, director, administrator or agent of any of them acting within the course and scope of his/her employment. I understand that any misrepresentation or omission on this application may be grounds for rejection of my application of any subsequent employment with the City.

Applicant signature: _____ **Date:** ____/____/____

Thank you for your interest in applying for employment with The City of Willcox.

This self-identification form will be separated from the application and will not be used in the employment decision.

The City of
Willcox
Willcox, Az

**EQUAL-EMPLOYMENT OPPORTUNITY
SELF-IDENTIFICATION FORM**

Job Number: _____ **Job Title applied for:** _____

Department: _____

The City of Willcox, an equal opportunity, affirmative action employer, recruits members of diverse racial and ethnic groups, persons with disabilities, veterans and woman. The City requests your assistance in meeting federal regulations by providing the following information.

As a matter of City policy as well as applicable law, we are required to keep records and perform certain an analyses of our applicant pools by race, ethnicity, and sex. Since such analyses are only possible if we know the profile of our applicants, we ask you to voluntary complete this survey and return it to us promptly.

The information which applicants provide does not at all affect their prospects for employment and is treated very confidentially. For any statistical analysis to be meaningful we must have information on as many applicants as possible and it is just as important to collect this information from men and from non-minorities as it is to obtain it from women and minority group members.

We appreciate that some applicants will find this request intrusive and we regret this. However, please be advised that we are required by the government to keep such records and perform such analyses: your cooperation will allow us to be accurate.

Please mark the Age Group to which you belong:

- | | |
|----------------|-------------------|
| _____ Under 20 | _____ 50-59 |
| _____ 20-29 | _____ 60-69 |
| _____ 30-39 | _____ No Response |
| _____ 40-49 | |

The categories listed below are those used by the US Bureau of Census and the Department of Labor and are the only options currently available for federal reporting purposes. We recognize that these categories do not accommodate persons with diverse ethnic backgrounds. We ask that you choose only one, otherwise we will be unable to perform any analysis.

How do you describe yourself? (Indicate only one)

- American Indian or Alaskan Native** : A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or has community recognition.
- African American /Black (not of Hispanic Origin)**: A person having origins in any of the Black racial groups of Africa.
- Hispanic**: A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regards or race.
- White (not of Hispanic Origin)**: A person having origins in any of the peoples of Europe, North Africa, or the Middle East.
- Asian American /Pacific Islander**: A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. The area includes for example, China, Japan, Korea, The Philippines Islands, and Samoa; and on the Indian subcontinent, includes India, Pakistan, Bangladesh, Nepal, Sri Lanka, Sikkim and Bhutan.

Sex: Male Female

Name: _____ **Date:** ____/____/____
Last (Please print clearly) First Middle Initial

The City of Willcox is an equal opportunity, affirmative action institution. The City of Willcox prohibits discrimination in its programs and activities on the basis of race, color, religion, sex, national origin, age, disability, veteran status, or sexual orientation and is committed to maintaining an environment free from sexual harassment and retaliation.