



**THE CITY OF ST. GEORGE IS AN EQUAL OPPORTUNITY EMPLOYER**

Read this Application carefully. Type or print clearly in ink. You must sign and date this application and include all information requested. If more space is needed, attach an addendum using the same application format. Resumes may be submitted as an attachment but will not be accepted in lieu of a City Application. **Applications which include wording such as “see resume” will be rejected.** Copies of college transcripts or other official documents may be requested when claiming college credit and/or specialized training. False statements, evidence of fraud or deceit in connection with this application will disqualify you from the selection process, and if discovered after employment, are grounds for discharge. This application and all attached documents are official records of the City of St. George and cannot be returned.

**Certificates:** List job related professional or trade licenses, certificates, or registrations

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**Languages:** If job related, list languages you speak, read and write other than English: \_\_\_\_\_

Do you have a valid Driver’s License?  No  Yes State \_\_\_\_\_

Do you have a valid CDL?  No  Yes Class \_\_\_\_\_ State \_\_\_\_\_

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Typing/Keyboarding Speed \_\_\_\_\_ Net Words/Minute \_\_\_\_\_ Have you certified this speed within the last 12 months?  No  Yes

**Computer Skills:** List all computer software programs in which you are proficient.

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**EDUCATION AND TRAINING**

HAVE YOU GRADUATED FROM HIGH SCHOOL OR RECEIVED A HIGH SCHOOL EQUIVALENCY DIPLOMA (GED)?  No  Yes

COLLEGE, BUSINESS, TRADE SCHOOL OR SPECIAL TRAINING	CREDITS COMPLETED		MAJOR	DEGREE, CERTIFICATE, OR YEARS ATTENDED
	SEMESTER HOURS	QUARTER HOURS		

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**EXPERIENCE**

**ON THE FOLLOWING PAGES, PLEASE LIST ALL EMPLOYMENT FOR THE LAST 5 YEARS BEGINNING WITH THE PRESENT/MOST RECENT EXPERIENCE.** Include all military service if applicable. There can be no unexplained gaps of more than one month. If you were unemployed, you must list the period and indicate the reason (school, between jobs, etc.). If you wish to elaborate on your experience, a supplemental sheet or resume may be attached, but this section must be completed. If using additional sheets to list further work experience, please use the same format as follows:

Current  
Employer: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
month/year month/year  
Complete Address: \_\_\_\_\_  Full-Time  Part-time  
\_\_\_\_\_  Volunteer  Apprenticeship  
Phone Number: \_\_\_\_\_ Hours per Week: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Last Monthly Salary: \_\_\_\_\_  
Supervisors Name: \_\_\_\_\_  
Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
May we contact your current employer regarding your qualifications?  No  Yes

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Employer: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
month/year month/year  
Complete Address: \_\_\_\_\_  Full-Time  Part-time  
\_\_\_\_\_  Volunteer  Apprenticeship  
Phone Number: \_\_\_\_\_ Hours per Week: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Last Monthly Salary: \_\_\_\_\_  
Supervisors Name: \_\_\_\_\_  
Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
month/year month/year  
Complete Address: \_\_\_\_\_  Full-Time  Part-time  
\_\_\_\_\_  Volunteer  Apprenticeship  
Phone Number: \_\_\_\_\_ Hours per Week: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Last Monthly Salary: \_\_\_\_\_  
Supervisors Name: \_\_\_\_\_  
Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
month/year month/year

Complete Address: \_\_\_\_\_  Full-Time  Part-time  
 \_\_\_\_\_  Volunteer  Apprenticeship

Phone Number: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Job Title: \_\_\_\_\_ Last Monthly Salary: \_\_\_\_\_

Supervisors Name: \_\_\_\_\_

Duties \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**REFERENCES**

List three persons who are not related to you and who have definite knowledge of your qualifications for the position for which you are applying.

FULL NAME	BUSINESS OR OCCUPATION	CURRENT TELEPHONE NUMBER	ALTERNATE TELEPHONE NUMBER

**CERTIFICATION OF APPLICANT**

*PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY BEFORE SIGNING*

I hereby authorize any previous employer and references to give and release to the City of St. George any and all information of whatever kind in either written or verbal form which relates to my ability to perform the duties of the position for which I am applying. I release the City of St. George from any liability for the use of this information in considering and reviewing my application for the available position.

I also agree to allow St. George City to determine my competence for certain positions in the fire or police departments or in the departments where funds are involved, by obtaining credit, criminal and other job related information about me.

I understand that this employment application and any other City documents are not contracts of employment and that any oral or written statements to the contrary are expressly disavowed.

I certify that all statements made in this application are true and complete and understand that any misrepresentation of material fact in this document or during an interview may subject me to disqualification or dismissal.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

