



City of Sidney  
201 W Poplar Street, Sidney, Ohio 45365 Fax 937-498-8160

**Employment Application**  
(An Equal Opportunity Employer)

**Job# 2017-00 – Summer/Temporary**

Position applied for \_\_\_\_\_ DATE \_\_\_\_\_

If you need additional space for any response, please continue on a separate sheet of paper.

Questions about the application: Human Resources at [vallen@sidneyoh.com](mailto:vallen@sidneyoh.com) or [kholthaus@sidneyoh.com](mailto:kholthaus@sidneyoh.com)

**PERSONAL INFORMATION**

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAMES? IF SO, LIST ALL NAMES

\_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_  
Street City State Zip

(If less than 5 years at present address)

PREVIOUS ADDRESS \_\_\_\_\_  
Street City State Zip

PHONE NUMBER \_\_\_\_\_ CELL PHONE NUMBER \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ REFERRED BY \_\_\_\_\_

Commercial Driver License: Yes \_\_\_ No \_\_\_ Class \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

**MISCELLANEOUS**

Please check the position in which you would be interested:

**LABOR / MAINTENANCE - 18 YEARS OF AGE OR OLDER**

Parks Maint.  Street  Cemetery  Engineering  Water/Wastewater

**RECREATION**

Food Program/Recreation-Laborer I

**MUNICIPAL POOL - 16 YEARS OF AGE OR OLDER (16 YEAR OLD - APPLY ONLY HERE)**

**CONCESSIONS:**  Concession Manager  Concession Laborer I  Lead Concession Labor II

**POOL:**  Pool Cashier  Pool Manager  APM (Supervisor)  Lifeguards

Do you have a valid: Lifeguard Certificate?  Yes  No First Aid Certificate?  Yes  No  
W.S.I. Certificate  Yes  No CPR Professional Rescuer Certificate?  Yes  No

When would you be available? \_\_\_\_\_ Full-time (Summer) \_\_\_\_\_ Part-time (after school etc.) \_\_\_\_\_

Are you physically able to perform the job with or without reasonable accommodation?

YES \_\_\_\_\_ NO \_\_\_\_\_

EDUCATION				
	Name & Location of School Attended	Number Years	Did You Graduate	Subjects Studied
High School				
College				
Other				

Subjects of special study or research work \_\_\_\_\_

U.S. Military Service or Reserves: List dates, rank, and type of discharge \_\_\_\_\_

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

List location and name of last unit assignment \_\_\_\_\_

### REFERENCES

Give below the names of three persons not related to you, whom you have known at least one year and whom have knowledge of your character, experience, and abilities. Do not list subordinate employees.

Name \_\_\_\_\_ Business \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Email address \_\_\_\_\_ Reference Type \_\_\_\_ Professional \_\_\_\_ Personal

Name \_\_\_\_\_ Business \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Email address \_\_\_\_\_ Reference Type \_\_\_\_ Professional \_\_\_\_ Personal

Name \_\_\_\_\_ Business \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Email address \_\_\_\_\_ Reference Type \_\_\_\_ Professional \_\_\_\_ Personal

<b>EMPLOYMENT EXPERIENCE</b>
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LIST ALL THE JOBS YOU HAVE HAD (Maximum of 20 years), STARTING WITH THE MOST RECENT.

<b>Employer</b>	<b>Address</b>	<b>Telephone #</b>
<b>Job Title</b>	<b>Work Performed</b>	<b>Supervisor</b>
<b>Dates Of Service</b>	<b>Reason for Leaving</b>	<b>Hourly Rate/ Salary Start-Final</b>
<b>Employer</b>	<b>Address</b>	<b>Telephone #</b>
<b>Job Title</b>	<b>Work Performed</b>	<b>Supervisor</b>
<b>Dates of Service</b>	<b>Reason for Leaving</b>	<b>Hourly Rate/ Salary Start-Final</b>
<b>Employer</b>	<b>Address</b>	<b>Telephone #</b>
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<b>Employer</b>	<b>Address</b>	<b>Telephone #</b>
<b>Job Title</b>	<b>Work Performed</b>	<b>Supervisor</b>
<b>Dates of Service</b>	<b>Reason for Leaving</b>	<b>Hourly Rate/ Salary Start-Finish</b>

If you need additional space, please continue on a separate sheet of paper.

**SPECIAL LICENSES, SKILLS & QUALIFICATIONS**

Summarize special job-related skills, qualifications, licenses, certifications, or training that you acquired from employment or other experience. (Add a separate sheet if necessary)

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**IN CASE OF EMERGENCY NOTIFY:**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

The information provided in this Employment Application is true and complete. The City may terminate my employment for any false or misleading statements or omissions in this application, whenever they may be discovered.

If I receive an offer of employment, I authorize a medical examination, including a drug screen, by an examiner selected by the City. I understand that any offer of employment may be contingent upon such medical examination and a background check.

I acknowledge that, if hired, my employment is for no definite period and may be terminated at any time with or without cause, by either me or the City. I understand that this cannot be changed except in a writing signed by the City Manager that states it is intended to make that change. Anything said or implied to the contrary is not binding on the City.

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

**AUTHORIZATION FOR RELEASE OF INFORMATION**

I authorize any reference, school, former employer, military or other person to disclose to the City, upon request, any information they may have about me and I release them from all liability for disclosing such information.

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

**CONSENT TO EMPLOY MINOR**

The undersigned, parent or guardian of \_\_\_\_\_,  
a minor \_\_\_\_\_ years of age (date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_), hereby  
consents to the employment of said minor by the City of Sidney, Ohio, during the  
summer vacation months of 20 \_\_\_\_.

This consent is being given to comply with Section 4109.02, O.R.C.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

*I understand that this is not an offer for employment.*

\_\_\_\_\_  
Parent or Guardian

Section 4109.02, Ohio Revised Code

*Minors aged sixteen or seventeen who are to be employed during summer vacation months after the last day of the school term in the spring and before the first day of the school term in the fall, in nonagricultural and non- hazardous employment as defined by the "Fair Labor Standards Act of 1938", 52 Stat. 1060.29 U.S.C.A. 201, and similar state statutes, or in other employment not prohibited to minors age sixteen or seventeen by law, shall not be required to provide an age and schooling certificate as a condition of employment. In order to be hired for employment during summer vacation months, such minors shall provide the employer with the following:*

- (1) *Evidence of proof of age in the same manner as proof of age is provided the superintendent of schools under Division C of Section 3331.02 of the Revised Code.*
- (2) *A statement signed by the minor's parent or guardian consenting to the proposed employment during the summer vacation months. For the purpose of this Section, in the absence of a parent or guardian a person over eighteen years of age with whom the minor resides may sign such statement.*

*The employer shall retain a copy of the proof of age and the statement of consent with the minor's employment records.*

**AUTHORIZATION AND DISCLOSURE OF CONSUMER REPORT  
AND INVESTIGATIVE CONSUMER REPORT  
UNDER THE FAIR CREDIT REPORTING ACT**

The City may obtain or cause to be prepared consumer reports for employment purposes. It may be an investigative consumer report which is obtained through personal interviews and might include information as to your character, general reputation, personal characteristics and mode of living.

You may make a written request, within a reasonable period of time, for a disclosure of the nature and scope of any investigative consumer report we have requested. You may also request a written summary of your rights under the Fair Credit Reporting Act.

If you consent to our obtaining a consumer report or investigative consumer report, sign and date below. We will not process your application until this is signed.

\* \* \*

I authorize the City to obtain or cause to be prepared consumer reports, and investigative consumer reports, about me for employment purposes. I understand that in obtaining such consumer reports and investigative consumer reports, a consumer reporting agency may be used, and I authorize such use. This authorization and disclosure will remain effective for the duration of my employment, if I am hired.

I have received a copy of this authorization and disclosure.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed name

March, 2004

EMPLOYMENT OF MINORS

The U.S. Department of Labor prohibits employees under the age of 17 from driving on public roadways as part of his or her job. Seventeen-year-olds may drive on public roadways as part of their employment, but **only**, if all of the following requirements are met:

- The driving is limited to daylight hours;
- The 17-year-old holds a State License valid for the type of driving involved in the job performed;
- The 17-year-old has successfully completed a State approved driving education course and **has no record of any moving violation, at the time of hire;**
- The automobile or truck is equipped with a seat belt for the driver and any passengers, and the employer has instructed that the seat belts must be worn while driving the vehicle;
- The automobile or truck does not exceed 6,000 pounds of gross vehicle weight.

Due to the nature of the City's seasonal positions and the need for seasonal employees to be able to drive vehicles, the following policy applies to the hiring of all seasonal employees:

- **Sixteen (16)-year-olds will only be hired at the Sidney Municipal Pool**, where driving is not required as part of the job;
- **Seventeen (17)-year-olds will not be hired if they have a record of any vehicular moving violations at the time of hire**, except at the Sidney Municipal Pool, where driving is not required as part of the job.

**City of Sidney**  
**201 West Poplar Street**                      **Sidney, Ohio 45365**

**Seasonal Employment Application  
Parks and Recreation Department  
Additional Questionnaire**

1. A. Are you available to work through Labor Day?    Yes \_\_\_\_\_ No \_\_\_\_\_  
B. If not, what is your last available work day?    \_\_\_\_\_

2. List any certifications or licenses that you currently have:

Type	Issued By	Date Issued	Expiration Date	Name of Certificate

3. Please list all training/experience that qualifies you for the position you are applying for:

A. \_\_\_\_\_  
\_\_\_\_\_

B. \_\_\_\_\_  
\_\_\_\_\_

C. \_\_\_\_\_  
\_\_\_\_\_

4. If in school, what extra-curricular activities do you participate in that are related to the position?  
\_\_\_\_\_  
\_\_\_\_\_

5. What other activities do you participate in which are related to the position you are applying?  
\_\_\_\_\_  
\_\_\_\_\_



## Ohio Civil Rights Commission – Statistical Survey

**INSTRUCTIONS:** The City of Sidney is required to report on the statistical information requested below. If you choose to volunteer this information, it will be filed separately from your employment application. Whether or not you elect to provide this information is entirely voluntary and will not affect any employment decision. However, in order for us to gather the needed information, we do ask that you provide responses to all 6 questions. If you prefer not to answer any or all of the following questions, please select the box titled “No Response”. Thank you for your assistance in this statistical survey.

1) **ETHNIC RACIAL STATUS:** (Please check only one)

White       Hispanic       Asian American  
 Black       American Indian       Other       No Response

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2) **SEX:**

Male       Female       No Response

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3) **AGE GROUP:**

16       18 to 25       41 to 65  
 17       26 to 40       66 and older  
 No Response

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4) **HOW DID YOU HEAR ABOUT THIS JOB?** (Please check only one)

Sidney Daily News       Friend       Internet  
 Area Newspaper       Current Employee       Radio/Television  
 Ohio Employment Service       Professional Journal       No Response

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5) **RESIDENCE:** (Please check only one)

Sidney       Shelby County       Ohio       Out of State  
 No Response

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6) **DO YOU HAVE A KNOWN DISABILITY?**

Yes       No       No Response