

**City of Cotter  
Employment Application**

Name \_\_\_\_\_ Date \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Expires \_\_\_\_\_

.....  
Are you eligible to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

If you are under 18, do you have an employment/age certificate? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been convicted of or pleaded no contest to a felony within the last five years?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain \_\_\_\_\_

.....  
**Position Availability**

Position Applied For \_\_\_\_\_

Day's Available \_\_\_\_\_

Hours Available: From \_\_\_\_\_ To \_\_\_\_\_

.....  
**Education**

High School Diploma ☐ Yes Graduation Year \_\_\_\_\_ ☐ No

If not a graduate, last grade completed \_\_\_\_\_

GED ☐ Yes ☐ No

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**Higher Education**

Please list the University/College, Trade School and/or Business School you attended, Degree Certificate or Diploma received and the date of graduation.

School	Degree/Diploma/Certificate	Date of Graduation

**Additional Training or Skills**

Training Facility	Training/Skill	Date Attended & Certificate Received

**Previous Employment**

Please list all employment including military service if applicable. Begin with most recent and work back.

From \_\_\_\_\_ To \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Company Phone Number \_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_

Job Title \_\_\_\_\_

Hourly Rate \_\_\_\_\_ Weekly Salary \_\_\_\_\_ Monthly Salary \_\_\_\_\_

Description of Work \_\_\_\_\_

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**Previous Employment**

From \_\_\_\_\_ To \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Company Phone Number \_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_

Job Title \_\_\_\_\_

Hourly Rate \_\_\_\_\_ Weekly Salary \_\_\_\_\_ Monthly Salary \_\_\_\_\_

Description of Work \_\_\_\_\_

**Previous Employment**

From \_\_\_\_\_ To \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Company Phone Number \_\_\_\_\_

Reason for leaving \_\_\_\_\_

\_\_\_\_\_

Job Title \_\_\_\_\_

Hourly Rate \_\_\_\_\_ Weekly Salary \_\_\_\_\_ Monthly Salary \_\_\_\_\_

Description of Work \_\_\_\_\_

**Add additional sheets or resume providing sufficient qualifying experience date and employment history.**

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Please provide references other than relatives, who have knowledge of your character, experience or ability.

Name	Address	Phone Number

.....  
**Physical Record**

Do you have any physical condition which may limit your ability to perform the job applied for?    Yes \_\_\_\_\_    No \_\_\_\_\_

.....  
**In Case of an Emergency Notify**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Relationship \_\_\_\_\_

.....  
I understand that this application is not intended to create any contractual or other legal rights. It does not alter the at-will employment status nor does it create an employment contract for any specific period of time.

I certify that information contained in this application is true and complete.

I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired.

I authorize the verification of any or all information listed above.

Signature \_\_\_\_\_

Date \_\_\_\_\_

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Name \_\_\_\_\_ Date \_\_\_\_\_

I do hereby give permission to the City of Cotter to contact any past or present employers. ☐ Yes ☐ No

I do hereby give permission to the City of Cotter to view all personal social media sites.

☐ Yes ☐ No

Signature \_\_\_\_\_

Date \_\_\_\_\_