

**CITY OF SENECA
APPLICATION FOR EMPLOYMENT**

NAME _____

ADDRESS _____

PHONE NUMBER _____ SOCIAL SECURITY NO. _____

EDUCATION – YEARS COMPLETED _____

ARE YOU SIXTEEN YEARS OF AGE OR OVER: YES _____ NO _____

ARE YOU EIGHTEEN YEARS OF AGE OR OVER: YES _____ NO _____

DESIRED RATE OF PAY: _____/HOUR

WORK EXPERIENCE --- WHERE EMPLOYED, WHAT TYPE OF WORK AND HOW LONG WERE YOU EMPLOYED THERE – PLEASE LIST, BEGINNING WITH YOUR MOST RECENT EMPLOYMENT:

WHAT TYPE OF WORK ARE YOU APPLYING FOR? _____

WHAT ARE YOUR SPECIAL QUALIFICATIONS? _____

PERSONAL REFERENCES: (NAME, ADDRESS, PHONE NUMBER)

OTHER NOTES: _____

Drug Free Workplace: The City of Seneca will utilize all reasonable measures to maintain a drug-free workplace for its employees, customers, and the general public. The use, possession, sale or distribution of illegal drugs or paraphernalia, the improper or abusive use of legal drugs, or the use of alcohol or other intoxicating substances while on City property or other work locations is strictly prohibited. For the purpose of assuring compliance with the above, employees and applicants will be subject to random drug screening. In addition, the City will comply with all applicable state and federal laws concerning drug screening.

Qualifications of Employment: All applicants for any position with the City shall meet the minimum qualifications established for that position. Each applicant shall complete a job application form. A medical examination or other testing, including drug testing, may be required only after an offer of employment has been made, provided that, such exams or testing are required of all such applicants who are offered employment in similar positions or position classifications. The offer of employment is contingent upon applicant passing required tests and complying with any applicable residency requirements providing required licenses and certifications.

**I HEREBY ACKNOWLEDGE THAT I HAVE READ THE JOB DESCRIPTION AND AGREE TO PERFORM
THE DUTIES LISTED THEREIN IF SELECTED FOR EMPLOYMENT BY THE
SENECA AQUATIC CENTER.**

NAME (Printed)

SIGNATURE

DATE