

**CITY OF ABERDEEN**  
**APPLICATION**  
**FOR EMPLOYMENT**  
*An Equal Opportunity Employer*

**Parks, Recreation & Forestry**  
**Department**

225 SE 3<sup>rd</sup> Avenue  
Aberdeen, SD 57401-4245  
Phone (605) 626-7015  
Fax (605) 626-7989

*FOR EMPLOYER'S USE ONLY:*

Start Date \_\_\_\_\_

Position \_\_\_\_\_

Rate of Pay \_\_\_\_\_

Exact title of position applied for:	Other positions you would consider:
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**NOTE: Resumes will not be accepted in lieu of completion of any part of this application.**

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Street/Box City State Zip

Social Security Number \_\_\_\_\_ Email Address: \_\_\_\_\_

Telephone: \_\_\_\_\_  
Home Cell Work

Name and phone number of person who will know where you may be contacted.

\_\_\_\_\_

Have you ever attended school or been employed under any other name than used above?

Yes  No Name \_\_\_\_\_

Do you claim veteran's preference?  Yes  No If yes, attach a copy of DD214 (separation papers)

Are you legally eligible for employment in the United States?  Yes  No

\*Proof of US citizenship will be required upon hire.

Check each type of employment you will accept.

Seasonal: Duration of Season  Temporary: Six months or less  
 Full-time  Part-time If part-time, what days and hours are you Available? \_\_\_\_\_

When could you begin employment? Date: \_\_\_\_\_ After \_\_\_\_\_ Working days' notice to present employer.

Have you ever been employed by the City of Aberdeen?  Yes  No

Are you under age 18?  Yes  No If yes, will you be 18 by May 1<sup>st</sup>  Yes  No

Are you under age 16?  Yes  No If yes, will you be 16 by May 1<sup>st</sup>  Yes  No

May we contact your current, most recent or past employer regarding your qualifications?  Yes  No

If no, explain \_\_\_\_\_

List names, addresses and phone numbers of three personal references.

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

Be as thorough as possible in describing your education and work experience. Vague or incomplete answers will not be interpreted in your favor. If you need more space, attach additional sheets

**Education and Training**

Circle last year of education completed. For high school diploma or GED, circle "12".

6 7 8 9 10 11 12 13 14 15 16 17 18 plus.

Did you graduate from high school?  Yes  No Complete GED?  Yes  No

List formal education beginning with the most recent. Include college, high school, vocational or business school, apprenticeship, military training, etc.

Name and address of school \_\_\_\_\_

Attended from (mo/yr) \_\_\_\_\_ to \_\_\_\_\_ Total credit hours \_\_\_\_\_ Type of degree \_\_\_\_\_

Major(s) or course \_\_\_\_\_ Minor(s) \_\_\_\_\_

Did you graduate? \_\_\_\_\_ Type of degree \_\_\_\_\_

Name and address of school \_\_\_\_\_

Attended from (mo/yr) \_\_\_\_\_ to \_\_\_\_\_ Total credit hours \_\_\_\_\_ Type of degree \_\_\_\_\_

Major(s) or course \_\_\_\_\_ Minor(s) \_\_\_\_\_

Did you graduate? \_\_\_\_\_ Type of degree \_\_\_\_\_

Name and address of school \_\_\_\_\_

Attended from (mo/yr) \_\_\_\_\_ to \_\_\_\_\_ Total credit hours \_\_\_\_\_ Type of degree \_\_\_\_\_

Major(s) or course \_\_\_\_\_ Minor(s) \_\_\_\_\_

Did you graduate? \_\_\_\_\_ Type of degree \_\_\_\_\_

Use this space to identify any other educational experiences you have had which are pertinent to this position. Include workshops, seminars, military or vocational training, etc. which are not listed above. Indicate time involved (hours per week, number of weeks, number of credits, etc.)

List below any violations for which you were convicted in a court of law. Convictions will not necessarily disqualify you from employment with the City of Aberdeen. The decision will be based on a number of factors such as duties of the job for which you are being considered, the seriousness of the offense of which you were convicted, your age at the time of the offense, rehabilitation efforts, the recency of the offense etc. Please be complete. All information is subject to verification.

Offense	Place	Date	Disposition (Sentence)
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Do you possess a valid Drivers License?  Yes  No Do you use a computer?  Yes  No

Do you have a valid Commercial Drivers License?  Yes  No List any office machines you can operate: \_\_\_\_\_

Driver's License No. \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

List any motorized equipment you can operate: \_\_\_\_\_

**Work History**

Begin with your current or most recent position and work backwards. List each promotion as a separate job. Include paid and verifiable non-paid experience including military service. Be as accurate and complete as possible, especially in describing the duties of each position. If you need more space, attach additional sheets using the same format.

**Current or most recent position**

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_ Total Years/Months \_\_\_\_\_

Job Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Employer's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Name Title  
Number of employees you supervised \_\_\_\_\_ Average hours worked per week \_\_\_\_\_

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

Complete Description of duties \_\_\_\_\_

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

**Next previous position:**

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_ Total Years/Months \_\_\_\_\_

Job Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Employer's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Name Title  
Number of employees you supervised \_\_\_\_\_ Average hours worked per week \_\_\_\_\_

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

Complete Description of duties \_\_\_\_\_

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

**Next previous position:**

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_ Total Years/Months \_\_\_\_\_

Job Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending \_\_\_\_\_

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Employer's Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone \_\_\_\_\_

Name Title  
Number of employees you supervised \_\_\_\_\_ Average hours worked per week \_\_\_\_\_

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

Complete Description of duties \_\_\_\_\_

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

Please list any experience or training related to the position(s) you are applying for \_\_\_\_\_

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**DRUG-FREE WORKPLACE ACT COMPLIANCE:** The City of Aberdeen complies with the Drug-Free Workplace Act. As a condition of your employment, you may be asked to participate in drug screening. If you refuse such screening or test positive (evidence of drug usage), you will not be offered employment or such offer will be withdrawn.

**AMERICANS WITH DISABILITIES ACT COMPLIANCE:** The City of Aberdeen fully subscribes to the provisions of the Americans With Disabilities Act and will attempt in its employment process to make any reasonable accommodations necessary to assist qualified persons with disabilities.

I hereby certify that this application is complete to the best of my knowledge for the periods of employment listed and all information given is true and contains no misrepresentations. I am aware that all statements on this application are subject to investigation and verification. I understand that any withholding of information, misrepresentation or falsification of statements on this application or on City medical forms could result in rejection for employment, or if employed, termination from the City at any time.

I authorize and release from liability all employers, persons, schools, law enforcement agencies and other organizations named in this application to provide information requested by the City of Aberdeen in its processing of this application.

I also understand that nothing in this application or in the granting of an interview is intended to create an employment contract. I have received no promise regarding employment and I understand that no such promise or guarantee is binding on the City of Aberdeen. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that the City of Aberdeen has a similar right.

**YOU MUST SIGN THIS APPLICATION. UNSIGNED APPLICATIONS MAY BE DISQUALIFIED.**

Sign here in ink \_\_\_\_\_ Date \_\_\_\_\_