



City of Chaska
 Department of Parks and Recreation
 1661 Park Ridge Drive
 Chaska, MN 55318
 952-448-3176

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, or national origin.

Part Time Application for Employment

PERSONAL INFORMATION

Date / /

Name _____

Last

First

Middle

Present Address _____

Street

City

State

Zip

Permanent Address _____

Street

City

State

Zip

Phone No. _____ Referred By: _____

Are you under the age of 18? Yes No If yes, can you provide proof of age? Yes No
 If offered employment, are you able to provide proof of your identity and eligibility to work in the U.S. as required by Federal Law? Yes No

EMPLOYMENT DESIRED

Position _____ Date you can start / / _____ Desired Salary _____

Are you currently employed? _____ If so, may we inquire of your present employer? _____

Ever applied to this company before? _____

Where _____

When _____

AVAILABILITY

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From	From	From	From	From	From	From
To	To	To	To	To	To	To

Are you looking for: Part Time Temporary Number of hours per week: _____
 Are you available to work day? Yes No Date available to being work: _____
 Are you available to work nights? Yes No Are you available to work weekends? Yes No

All candidates interested in a Management position must complete the information below.

A valid U.S. state driver's license and state minimum insurance coverage is required for all shift and salaried management positions.

Do you have a valid U.S. state driver's license? Yes No Do you have state minimum insurance coverage? Yes No
 If yes, indicate state and number: _____ If yes, indicate state, company, and policy number: _____
 Do you have 2 or more years of driving experience? Yes No

EDUCATION

Name and Location of School

Circle Last Year Completed

Did you Graduate?

Subjects Studied and Degree(s) Received

High School	_____	1 2 3 4	YES NO	_____

College	_____	1 2 3 4	YES NO	_____

Trade, Business, or Correspondence School	_____	1 2 3 4	YES NO	_____

Special Skills: _____

Activities Other than Religious (Civic, Athletic, etc.): _____

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, AGE, SEX, COLOR, OR NATIONAL ORIGIN OF ITS MEMBERS.

FORMER EMPLOYERS

List below the last four employers, starting with the last one first.

Date (Month and Year)	Name and Address of Employer	Salary	Position	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				
From:				
To:				

REFERENCES: Give below the names of three persons not related to you, whom you have know at least one year.

Name	Address	Business	Years Acquainted

PHYSICAL RECORD: Do you have any physical condition which may limit your ability to perform the job applied for? *This question is voluntary, and any answers will be kept confidential.*

Have you ever been convicted of a criminal offense, petty misdemeanor, or charged with an ordinance violation?* Yes No
 If yes, please describe the nature of the conviction, including dates charged, penalties, and current disposition. Use additional paper if necessary:

* Conviction of a crime, petty misdemeanor, or charged with an ordinance violation will not necessarily disqualify you from consideration of employment and each instance and explanation will be considered as it relates to the position for which you are applying.

In Case of Emergency Notify:

Name Address Phone No.

Job Offer Contingent Requirements:

All job offers will be contingent on the result of a Social Security Number Verification.
 All job offers for any positions that require driving on company business will be contingent on the result of a Motor Vehicle Record Check
 All job offers will be contingent on the result of a Background Check.
 I have read and fully understand the foregoing and seek employment under these conditions.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated any time without any previous notice.

Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

Interviewed By _____ Date: _____

REMARKS: _____

Neatness		Ability	
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Hired	For Dept.	Position	Will Report	Salary Wages
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Approved: 1. _____ 2. _____ 3. _____
 Employment Manager Dept. Head General Manager