#### Please Return To:



City of Newark Parks & Recreation Dept 220 South Main St Newark, DE 19711



### APPLICATION FOR EMPLOYMENT

#### **EQUAL EMPLOYMENT OPPORTUNITY POLICY**

We welcome you as an applicant for employment. Your application will be considered with others in competition for the position in which you are interested. It is the policy and intent of the City of Newark to provide equality of opportunity in employment to all persons. This policy prohibits discrimination because of race, color, religion, national origin, marital status, physical or mental disability, sex, or age (except when sex or age is bona fide occupational qualification) in all aspects of our personnel policies, programs, practices and operations.

This policy applies to all phases of full, part-time, temporary, and seasonal employment.

All information contained in or connected with this application will be considered personal and confidential and used only in conjunction with your possible employment by the City of Newark. Please furnish us with complete information as outlined in this application. You are encouraged to attach any additional information which you believe qualifies you for the position for which you are applying.

Please print in ink.

			T .				
Title of position(s) app	lied for:						
1.			3.	/ <u></u>			
2.			4.				
PERSONAL INFORMATION							
Last Name First Name Mid			ldle I	le Initial Social Security #			
			-				
Address				City	State	Zip Code	
Home Telephone Number   Cell Phone Number				Work Telephone Number			
		١					
Birthdate: Police Officer Applicants Only				E-Mail Address			
Have you ever been convicted as an adult for a criminal violation?  Yes  No				Drivers Lic. No./State			
If yes, Date and Place		Nature of Offense	)		Disposition		
PERSONNEL USE ONLY	Date Received	d	Ву				

#### **EMPLOYMENT EXPERIENCE**

	Please list employers beging also submit a personal res	nning with your present or most re ume along with this application.	ecent employer. Please	e be complete.	You may		
1.	Employer			Da	tes		
	A 1.1			From	То		
	Address						
	Telephone	Reason for Leaving		Wage	Rate		
	( )			Start	Final		
	Supervisor/Title	May We Contact	Full Time	7.00			
		Yes □ No □	Part Time 🗀				
	Job Title	Duties Performed					
2.	mployer				Dates		
				From	То		
	Address						
	Telephone	Wage Rate					
	( )			Start	Final		
	Supervisor/Title	May We Contact	Full Time 🖂				
		Yes □ No □	Part Time				
	Job Title						
		No.					
3.	Employer			Da	tes		
				From	То		
	Address						
	Telephone	ephone Reason for Leaving		Wage Rate			
	( )			Start	Final		
	Supervisor/Title	May We Contact	Full Time 🖂				
		Yes □ No □	Part Time 🗆				
	Job Title	Duties Performed					
4.	Employer	Dates					
		From	То				
	Address						
	Telephone	Wage Rate					
	( )	Start	Final				
	Supervisor/Title	May We Contact Yes □ No □	Full Time				
	Job Title	Duties Performed					

#### **EDUCATIONAL INFORMATION**

Circle Highest Grade Completed	Grade School 1 2 3 4 5 6	7 8 9	High School 10 11 12	Have you pas Yes □	sed the GED Test?	
	College 1 2 3 4	ļ	Post. Grad 1 2 M.A. PHD			
School	Name and Mailing	Address of	School	s Attended rom/To	Credits Earned Degree or Major	
High School						
College/ University						
Graduate						
Technical						
Other						
	_					
List any Special Co	urses, Seminars, Workshops	, Licenses,	Certificates related to	this position.		
List any Personal Skills related to this position.						
Ziot arry i orderial dicina rotatod to timo position.						
Typing Speed — W.P.M. Shorthand Speed — W.P.M.						
Military Service:		Branch	,	Rank-Grade		
From	То					

# PERSONAL REFERENCES List three persons other than former employers or relatives who would have knowledge of your qualifications for the position for which you are applying. PHONE NUMBER **ADDRESS** NAME & OCCUPATION ) PLEASE STATE BRIEFLY, IN YOUR OWN HANDWRITING, YOUR REASON FOR APPLYING FOR THIS POSITION. I also certify that this application contains no willful misrepresentations or falsifications, and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentations or falsifications, my application may be rejected, my name may be removed from consideration, or I may be dismissed. I authorize the City of Newark to conduct or participate in an investigation of my personal background, work history and police record as may be necessary to verify the information provided in my employment application and/or to determine my fitness to hold the position for which I have applied.

Signature

Date

# APPLICATION SUPPLEMENT Newark Parks & Recreation

			DAT	E:	
NAME:	TE	LEPHONE:	DAY	NIGHT	
ADDRESS:	Waste of the second	CITY	<b>/</b> :	ZIP CODE: _	
* CURRENT ED	UCATION LEV	/EL:			
If High School st	udent (circle or	ne): Fres	shman Sopho	more Junior Ser	nior
If College studer	nt (circle one):	Fres	shman Sopho	more Junior Ser	nior
Your Major					
Other (explain):	ing list of activ	vities, place	a check for t	hose you have l	been
ACTIVITY P	ARTICIPANT	TAUGHT	<b>ACTIVITY</b>	PARTICIPANT	TAUGHT
Art Ballet Baseball Basketball Baton Twirling Camping Ceramics Cheerleading Children's Games Cooking Crafts Dance Exercise/Fitness Golf Gymnastics Lacrosse What.other activ Services?	ities have you	organized	or directed?	e	
* In what capacit					
Community Spec	cial Events				
Sports Umpiring/					
Service Club, Fra					
* List your favorite					

## CITY OF NEWARK Delaware

#### **AFFIRMATIVE ACTION FORM**

Just as some applicants are given tests for employment, the City is periodically evaluated for compliance with Equal Employment Opportunity regulations. In order to assist the City in monitoring its compliance with these regulations, all applicants are requested to complete this form voluntarily. You may refuse to provide any or all of the following information. This information will be kept completely separate from your application and will have absolutely no bearing on the status of your application. This information will be used solely for record keeping purposes.

NAME:		DATE:	DATE:		
POSITION APPLIED FOR:			<del></del>		
	9				
GENDER:	MALE FEMALE				
ARE YOU OVER 18?	YES NO				
MILITARY VETERAN?	YES NO				
ETHNICITY:					
HISPANIC OR LATI NOT HISPANIC OR	NO (ANY RACE) LATINO (ANY RACE)	r <del>a Transaction</del>			
RACE (MARK ONE OR MOF	RE):				
AMERICAN INDIAN ASIAN BLACK OR AFRICAI WHITE	OR ALASKA NATIVE N AMERICAN				
REFERRAL SOURCE (PLEA	SE LIST NAME, IF A	ROPRIATE):			
WALK IN SPECIAL PUBLICATION CITY EMPLOYEE PRIVATE EMPLOYMENT AG JOB FAIR NEWSPAPER OTHER (PLEASE SPECIFY)	ENCY	JOB POSTING STATE EMPLOYMENT AGENCY COLLEGE PLACEMENT OFFICE			