### Part-Time Summer Employment City of Bridgeport - Public Works Dept

The City of Bridgeport is seeking applicants for part-time help working with the Public Works Department. Examples of some tasks will be painting curbs and fire hydrants, trimming park lawn, trimming trees, cleaning storm drains, filling potholes besides other tasks as needed. Applications are available at the City Hall, 809 Main Street or online at <a href="https://www.bridgeportne.gov">www.bridgeportne.gov</a>. The City of Bridgeport is EOE and Veteran Preference.

## City of Bridgeport, Nebraska Application for Employment

The City of Bridgeport is an Equal Opportunity Employer. Race, color, religion, age, sex, disability, marital or veteran status, place of national origin and other categories protected by law are not factors in employment, promotion, compensation or working conditions.

Please print or write legibly in in	k. Fill in al	l blanks co	mpletel	v.							
POSITION APPLIED FOR:				,				DAT	TE OF A	APPLICAT	TON:
Last Name	First Name					Middle Initial					
Address			City and	Ctata					7:		
Address:	City and State				Zip						
Telephone: Home		Cell					Work/Business				
reiephone.		Cell				WONV DUSINESS					
APPLICANT INFORMATION:  Do you have a valid driver's license	e []Yes	Lic	ense No	<u> </u>				State		Exp. date	9
Bo you have a valid driver o licerior	ise [] Yes License No.				Julio		=xp: dut				
Are you legally eligible to work in	the United	States?	[]\	'es [	] No			1			
(Proof of citizenship or immigration	n status wil	I be require	d upon e	mploym	ent)						
*Have you ever been employed wit	h the City	of Bridgepo	rt before	? [ ] Yes	[] No						
If yes, give date:		partment?									
*Have you ever been convicted of	a misdeme	anor or felo	ny in civi	lian or m	nilitary co	ourts?	[]	/es [ ]	No		
(Conviction will not necessarily d	isqualify ar	n applicant f	rom emp	loyment	.)						
Have you ever been dismissed from			conduct,	or have	you eve	r resigne	ed []	Yes [	] No		
on request to avoid discharge? Please explain.											
Are you currently employed? []Yes []No If yes, may we contact your employer? []Yes []No											
Are you related to anyone employed by the City of Bridgeport? [ ] Yes [ ] No											
If yes, Name of relative: Department:											
Date you can start:				Salary	Desired	1:					
EDUCATIONAL BACKGROUND:											
EBOOATIONAL BACKGROONS.	High School or GED			Undergraduate				Graduate/ Professional			
			College/University			ty					
School Name and Location										•	
Years Completed	9 10	) 11	12	1	2	3	4	1	2	3	4
Diploma/Degree	3 10	, , , , ,	12	'		] 3		'		1 3	-
Major and Minor Subjects											
List Licenses, Professional Registration or other Recognition:											
List Special Skills or qualifications:											
MILITARY: Complete this section  Branch of Service	n if you se										
· · · · · · · · · · · · · · · · · · ·											
Period of Active Duty:		Rank at Discharge:									
From To											
Are You Claiming Veteran's Preference? [ ] Yes [ ] No If Yes, a copy of honorable discharge papers, (form DD214) must be attached to this application to be eligible. Veteran's Preference											
only applies when a qualified candi										5 . 1010	
For City use only!											
This application was received by:						Da	nto				

#### **EMPLOYMENT EXPERIENCE:**

Start with your present or most recent position for a period of 10 years including any military service and complete the below information fully. If you need additional space, please continue on a separate sheet of paper.

Application should be fully completed, without reference to attached resume. In addition, you may include a resume.

Name of Employer:		Dates Employed (Month & Year)		Salary Rate:		
		From: To:	Total:	Starting:	End:	
Address:		Name of Supervisor:		Your Position:		
City State	Zip	Describe your duties:				
Telephone Number:						
Reason for Leaving:						
		•				
Name of Employer:		Dates Employed (M	Ionth & Year)	Salary Ra	ate:	
		From: To:	Total:	Starting:	End:	
Address:		Name of Supervisor:		Your Position:		
City State	Zip	Describe your duties:				
Telephone Number:						
Reason for Leaving:						
Name of Employer:		Dates Employed (M	Ionth & Year)	Salary Ra	ate:	
		From: To:	Total:	Starting:	End:	
Address:		Name of Supervisor:		Your Position:		
City State	Zip	Describe your duties:				
Telephone Number:						
Reason for Leaving:						
		1				
Name of Employer:		Dates Employed (N	Ionth & Year)	Salary Ra	ate:	
		From: To:	Total:	Starting:	End:	
Address:		Name of Supervisor:		Your Position:		
City State	Zip	Describe your duties:				
Telephone Number:						
Reason for Leaving:						
REFERENCES: List three refe	rences who are	neither related to you no	r a former emp	lover.		
Name	are	Address (City, State, Zip)		Telephone Number	Years Known	
ABBU 10 41-12 CT /	<u> </u>					
APPLICANT'S STATEMENT: ( I certify that answers given in	Read carefully this application	petore signing) are true and complete to	the best of my	knowledge I authorize	e a complete	
background investigation, inc	luding but not li	mited to all statements co	ontained in the	application for employ	ment as may	
be necessary in arriving at an that false or misleading inform	nation given in I	my application or interview	w(s) may result	in discharge. I under	stand that if I	

Date:\_

Revised 9/10

Signed:

Personnel Manual.

#### FAIR CREDIT REPORT ACT DISCLOSURE & AUTHORIZATION

#### **DISCLOSURE**

As an applicant for employment or a current employee of the City of Bridgeport, you are a consumer with rights under the Fair Credit Reporting Act. When any of the following circumstances exits, the City of Bridgeport may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you: (1) when considering your application for employment, (2) when making a decision to offer you employment, (3) when deciding whether to continue your employment (if you are hired), or (4) when making other employment-related decisions directly affecting you.

For explanation purposes, a "consumer reporting agency" is a person or business which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing consumer reports to others, such as the City of Bridgeport.

A "consumer report" means any written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for employment purposes.

An "investigative consumer report" means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associates reported on or with other with whom you are acquainted or who may have knowledge concerning any such items of information.

In the event an investigative consumer report is prepared, you may request additional disclosures regarding the nature and scope of the investigative requested as well as a written summary of your rights under the Fair Credit Reporting Act.

AUTHORIZATION						
By signing below, I,	gative consumer report about me from a mation when making decisions regarding my					
Name	Date					

# CITY OF RRIDGEPORT

EMPLOYMENT REFERENCE CHECK						
I authorize the City of Bridgeport to check previous employment and/or personal references listed on my application and/or resume. I also give my consent to the City of Bridgeport to obtain the following:  • Records of educational institutions that I have attended; • Driving record and civil and criminal history records; • Employment records from previous employers to include evaluations, disciplinary history, complaints or grievances filed by or against me; • Pre-employment records from prospective employers; • A consumer report that might show financial and credit information, including credit reports and ratings; records from Financial Institutions to include loan performance, loan officer notes and financial statements, understanding that I have rights under the Fair Credit Reporting Act. • Any information from Counsel who have represented me in civil or criminal cases and I specifically waive the attorney client privilege in that regard.  The above records may be obtained through a variety of agencies/sources, including the internet.						
Signature (Including maiden name)	_ Address	Date				
(Including maiden name)  Social Security #	Phone Number					
Supervisor's Name	Title					
Date of Employment						
ANTI-DRUG PLAN	ACKNOWLEDGEMEN	T				
I 1 '4 4 NEDDACKA DDUG EDEE W	ODIZ DI A CE A CE CAOO	141 C'4 CD 11				

In accordance with the NEBRASKA DRUG FREE WORK PLACE ACT of 1988, and the City of Bridgeport's Anti-Drug Plan, the City of Bridgeport has instituted a drug testing program. The City of Bridgeport has reviewed the legal, operational, social, medical and ethical aspects of instituting this program. I understand that manufacture, distribution, possession, use, sale, transfer, purchase, and transport of illegal drugs will be considered a violation of the City of Bridgeport's Anti-Drug Plan and shall be grounds for disciplinary action, including termination. This program allows all employees to enjoy a safe, productive, and healthy work environment. Individuals are urged to seek assistance prior to problems affecting on-the-job performance.

PRE-EMPLOYMENT: Job applicants who are being considered for employment for positions with particular responsibilities must read the Anti-Drug Plan, sign a consent form, and submit to pre-employment drug testing.

CERTIFICATION: I have read, and understand the content of the above Anti-Drug Plan. I understand that compliance with the Anti-Drug will be considered a condition of employment with the City of Bridgeport.

Date	Signature