



Human Resources  
6131 Taylorsville Road  
Huber Heights, Ohio 45424  
Phone: (937) 233-1423  
Fax: (937) 233-1272  
[www.hhoh.org](http://www.hhoh.org)  
An Equal Opportunity Employer

# Application For Employment

The City of Huber Heights is an Equal Opportunity Employer and prohibits discrimination and harassment of any kind. Qualified applicants are considered for all positions without regard to race, color, religion, sex, age, national origin, military or veteran status, pregnancy status, mental or physical disability or any other status protected by law.

**PLEASE COMPLETE ALL SECTIONS AND EACH QUESTION COMPLETELY AND ACCURATELY**

- This employment application is to be used for all internal, external, and seasonal or temporary job postings. We strongly encourage you to provide a resume and cover letter in addition to this application. If you require special accommodations to participate in the application or selection process due to a disability, please contact Human Resources at (937) 237-5825.
- Applications are kept on file for one year. Please keep a copy for your files.
- A separate application must be submitted for each position for which you are applying.
- Applications must specifically reflect all requirements for the position, including experience and/or required courses of study. Please answer all questions accurately and completely. Incomplete applications may be disqualified.
- By signing this application, you are affirming that all information you provide is accurate and complete.

Position Applied For: \_\_\_\_\_

Date Applied: \_\_\_\_\_

Date available for work \_\_\_/\_\_\_/\_\_\_  Full-Time  Part-Time  Temporary  Internship

Name: \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
           Last                      First                      Middle

Address: \_\_\_\_\_  
           Number                      Street                      City                      State                      Zip

Home Phone: (\_\_\_\_) \_\_\_\_\_ Daytime Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ E-mail address: \_\_\_\_\_

Have you ever been employed by the City of Huber Heights? . . . . .  Yes  No  
 If yes, give Department/Division and date(s) \_\_\_\_\_

Do any of your friends or relatives work for the City of Huber Heights? . . . . .  Yes  No  
 If yes, please give name and relationship: \_\_\_\_\_

Are you on layoff, subject to recall? . . . . .  Yes  No

Are you able to perform the essential functions of this job, with or without reasonable accommodations? . . . . .  Yes  No

Have you ever applied with the City of Huber Heights? . . . . .  Yes  No  
 If yes, please give Department/Division and date(s): \_\_\_\_\_

I possess:  a valid Driver's License D.L.# \_\_\_\_\_ State \_\_\_\_\_

I possess:  a valid Commercial Driver's License D.L.# \_\_\_\_\_ State \_\_\_\_\_

## EDUCATION

	Name and Address of School	Diploma/Degree	Course of Study
High School		Graduate <input type="checkbox"/> Yes <input type="checkbox"/> No Or G.E.D. <input type="checkbox"/> Yes <input type="checkbox"/> No	
College, University, Business, Technical, Vocational, or Military Academy		Dates Attended (Mo./Yr. to Mo./Yr.):  Degree:	
Graduate School or Professional School		Dates Attended (Mo./Yr. to Mo./Yr.):  Degree:	

## MILITARY SERVICE

Were you, or are you currently in the US Armed Forces or subject to a Reserve obligation?  Yes  No

If yes, what branch? \_\_\_\_\_

Date of Services: From: \_\_\_\_\_ to \_\_\_\_\_ Rank: \_\_\_\_\_

## EMPLOYMENT HISTORY

- In this section, please describe the duties you have performed in previous positions, which demonstrate that you have the knowledge, skills, and abilities to perform the essential functions and duties of the job for which you are applying. You may include internships, verifiable volunteer activities, self-employment, and military experience. Please include any periods of unemployment.
- Begin with your most recent job or assignment first and list each job separately, extending for a period of 10 years.
- Additional pages of work history may be attached, if necessary. **A resume is not a substitute for this section of the application,** but may be attached. Do not write "see resume."

May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Dates of Employment _____ to _____
Type of Employment: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal/Temporary	
Employer: _____	Position/Title: _____
Address: _____	Pay: \$ _____ <input type="checkbox"/> Salaried <input type="checkbox"/> Hourly
City, State, Zip Code: _____	
Supervisor's name and title: _____	
Duties & Responsibilities: _____ _____ _____	
Reason for leaving: _____	

May we contact this employer?  Yes  No      Dates of Employment \_\_\_\_\_ to \_\_\_\_\_

Type of Employment:  Full-time  Part-time  Seasonal/Temporary

Employer: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Address: \_\_\_\_\_ Pay: \$ \_\_\_\_\_  Salaried  Hourly

City, State, Zip Code: \_\_\_\_\_

Supervisor's name and title: \_\_\_\_\_

Duties & Responsibilities:

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

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

May we contact this employer?  Yes  No      Dates of Employment \_\_\_\_\_ to \_\_\_\_\_

Type of Employment:  Full-time  Part-time  Seasonal/Temporary

Employer: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Address: \_\_\_\_\_ Pay: \$ \_\_\_\_\_  Salaried  Hourly

City, State, Zip Code: \_\_\_\_\_

Supervisor's name and title: \_\_\_\_\_

Duties & Responsibilities:

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

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

May we contact this employer?  Yes  No      Dates of Employment \_\_\_\_\_ to \_\_\_\_\_

Type of Employment:  Full-time  Part-time  Seasonal/Temporary

Employer: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Address: \_\_\_\_\_ Pay: \$ \_\_\_\_\_  Salaried  Hourly

City, State, Zip Code: \_\_\_\_\_

Supervisor's name and title: \_\_\_\_\_

Duties & Responsibilities:

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

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

