





**EMPLOYMENT EXPERIENCE (List all Full and part-time employment and periods of unemployment, minimum 7 years):** Start with you present or most recent employment (continue on plain paper if necessary). Include any job-related military service assignment.

May we contact your Present Employer?  Yes  No

EMPLOYER _____	TELEPHONE (____) _____	DATES EMPLOYED FROM _____ TO _____	Work Performed _____
ADDRESS _____		_____	_____
JOB TITLE _____		HOURLY RATE/SALARY	_____
SUPERVISOR _____		STARTING /FINAL	_____
TELEPHONE _____		_____	_____
REASON FOR LEAVING _____		_____	_____
_____		_____	_____

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EMPLOYER _____	TELEPHONE (____) _____	DATES EMPLOYED FROM _____ TO _____	Work Performed _____
ADDRESS _____		_____	_____
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TELEPHONE _____		_____	_____
REASON FOR LEAVING _____		_____	_____
_____		_____	_____

Give name, address, and telephone number of three references who are not related to you and are not previous employers.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ANSWER EVERY QUESTION WHICH PERTAINS TO THE POSITION FOR WHICH YOU ARE APPLYING

- A copy of your current resume may be attached to this **completed** application.
- A copy of a photo I.D. must be submitted with your application

If employment is offered and accepted, you will be required to provide:

- Birth certificate/Proof of Citizenship/Social Security Card
- High School Diploma or GED certificate
- Current/valid Driver's License
- Military Discharge or DD-214 (Military service)
- Law Enforcement certificate (if applying for LE position)

**APPLICANT'S STATEMENT**

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment and release of any information requested by the City of Troy for any information from present or former employers, courts or private individuals as may be deemed necessary by the City of Troy or its representative in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the City of Troy is of an "at-will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at-will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Applicant's Last Name, First, MI (Please print)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview     Yes                       No

Remarks: \_\_\_\_\_

Employed                       Yes                       No                      Date of Employment: \_\_\_\_\_

Job Title \_\_\_\_\_ Hourly rate/salary \_\_\_\_\_ Department \_\_\_\_\_

Notes: \_\_\_\_\_

CITY OF TROY  
PO Box 506  
Troy, Kansas 66087

**APPLICANT AFFIRMATION OF  
DRUG AND ALCOHOL TESTING POLICY**

**STATEMENT OF POLICY**

City of Troy is committed to ensure a safe and drug and alcohol free workplace for all city employees and the general public. As a public employer, the city has a compelling interest in establishing reasonable condition of employment. Prohibiting employee drug and alcohol use is one such condition.

City of troy is concerned with the well being of its' employees and the need to maintain employee productivity. The intent of the City of Troy's Drug and Alcohol Testing Program is to offer a helping hand to those who need it, while sending a clear message that any illegal drug or alcohol use is contradictory with public services and **WILL NOT BE TOLERATED!**

It is the policy of the City of Troy that all applicants, for safety sensitive positions, who receive a conditional offer of employment, submit to a drug test to document that they are drug free. Refusal to comply with this requirement will be considered the equivalent of receiving a confirmed "positive" result for employment and disqualification purposes. Any applicant who receives a confirmed "positive" drug screen result will have the offer of employment withdrawn and will be subject to disqualification from other application for city employment. However, if after a period of two (2) years from the effective date of the disqualification action, the same individual applies again from a safety sensitive position and there is not violation with the second test and the applicant can provide evidence of well-being from a treatment specialist, the individual may be assigned to a safety sensitive position.

**AFFIRMATION OF POLICY**

As an applicant for a position, I affirm that I have read and understand the City of Troy's Drug and Alcohol Testing Policy Statement of Police noted above, and I am aware that any offer of employment is conditional upon my taking a drug test and the results thereof. If hired into a position for the City of Troy, I agree to abide, by all provisions of the anti-drug policy, as a condition of my continued employment with the city.

\_\_\_\_\_  
Applicant Name (Please print)

\_\_\_\_\_  
Applicant Signature Date

\_\_\_\_\_  
City of Troy Representative Date