



Personal Information (Please Print)

Name (Last, First, MI)

Street address

City, State, Zip

Home phone number

Work phone number

Cell phone number

E-mail address

Social security number

Driver's license number/state/expiration

(if job involves any driving)

Employment Desired

Position applied for?

How did you hear about this position?

Date available for work?

Desired hours (full time, part time, etc.)

Education

	Name and Address of School	Course of Study	Total Years of Study	Degree/Diploma
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

List any seminars, classes or other education not listed above which may help qualify you for this position (if you need additional space, please use page 7):

Last Name, First Initial:

Today's Date:

Employment History

List below all present and past employers over the past ten years, starting with your **most recent** employer. Account for all periods of unemployment. You must complete this section even if attaching a resume. May we contact your current employer? YES NO

1.	Employer (current <input type="checkbox"/> Yes <input type="checkbox"/> No)	Start Date	End Date	Essential job functions of final position
	Address			1.
	City, State, Zip	Starting Salary	Ending Salary	2.
	Phone number			3.
	Fax number	Supervisor(s)		4.
	Job position(s)	E-mail address of supervisor		
	Reason(s) for leaving			
	What value did you add to this company or its customers?			
2.	Employer	Start Date	End Date	Essential job functions of final position
	Address			1.
	City, State, Zip	Starting Salary	Ending Salary	2.
	Phone number			3.
	Fax number	Supervisor(s)		4.
	Job position(s)	E-mail address of supervisor		
	Reason(s) for leaving			
	What value did you add to this company or its customers?			

Employment History

3.	Employer	Start Date	End Date	Essential job functions of final position	
	Address			1.	
	City, State, Zip		Starting Salary	Ending Salary	2.
	Phone number				3.
	Fax number	Supervisor(s)		4.	
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				
4.	Employer	Start Date	End Date	Essential job functions of final position	
	Address			1.	
	City, State, Zip		Starting Salary	Ending Salary	2.
	Phone number				3.
	Fax number	Supervisor(s)		4.	
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				

Name: _____

Employment History

5.	Employer	Start Date	End Date	Essential job functions of final position	
	Address			1.	
	City, State, Zip		Starting Salary	Ending Salary	2.
	Phone number				3.
	Fax number	Supervisor		4.	
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				
6.	Employer	Start Date	End Date	Essential job functions of final position	
	Address			1.	
	City, State, Zip		Starting Salary	Ending Salary	2.
	Phone number				3.
	Fax number	Supervisor		4.	
	Job position(s)	E-mail address of supervisor			
	Reason(s) for leaving				
	What value did you add to this company or its customers?				

Additional Information

List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability or any other protected status.

List any languages other than English that you can speak, read or write that could be of benefit to the position applied for:

	Fluent	Good	Fair
Speak			
Read			
Write			

Identify formal job training that relates to this position:

Identify what skills or certification you possess related to this position:

If you are hired, what value would you add to our company?:

Describe what you believe are the most unique features of your work history:

Name: _____

Additional Information

Have you ever been employed with the city before? Yes No

If Yes, when? _____

Do you have any relatives employed by the city? Yes No

If Yes, please provide their names and relationship to you: _____

Are you currently employed? Yes No

May we contact your employer? Yes No

Are you currently on "lay off" status and subject to recall? Yes No

If you are under 18 years of age, can you provide proof of your eligibility to work? Yes No

If hired, can you provide proof of U.S. citizenship or proof of your legal right to work in the U.S.? Yes No

Are you able to perform all of the essential functions of the job for which you are applying? Yes No

If hired, do you have a reliable means of transportation to and from work? Yes No

If hired, would you be able to travel or work overtime as needed? Yes No

Have you ever been convicted of a felony or misdemeanor? Yes No

If Yes, please explain:

A criminal record does not constitute an automatic bar to employment and will be considered only as it substantially relates to the job in question. If you are applying for a position with our company in the following states, please read the following instructions before responding

References

List below three persons not related to you who have knowledge of your work performance within the last 5 years

Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted

Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted

Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted

Additional Space

Additional space provided to expand on any points or questions asked previously in this application

Name: _____

Employment Application

Please read each statement closely and initial each acknowledging your understanding

Equal Employment Opportunity Statement

_____ The City of D'Iberville is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The City desires to maintain a work environment that is free of sexual harassment and discrimination due to sex, race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The City will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

Disclosure to Applicants Concerning Drug/Alcohol Testing

_____ If you are offered a position with the City of D'Iberville, you will be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by the city. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

Complete and Accurate Information

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

At-Will Employment

_____ I understand and agree that if I am employed, my employment will be "at-will", which means that the City may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the City will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superseded and that no promise or representation contrary to the foregoing is binding on the City unless made in writing and signed by the City Manager.

Testing Authorization

_____ If offered a position with the City of D'Iberville, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment.

Investigation Authorization

_____ I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.

Company Obligation

_____ I understand and agree that the City's acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that the City of D'Iberville is under no obligation to hire me as the result of accepting this completed application.

I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE City OF D'IBERVILLE.

Signature

Date

Para información en español, visite www.consumerfinance.gov/learnmore o escriba a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed

or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:

1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.

b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:

2. To the extent not included in item 1 above:

a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks

b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act

c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations

d. Federal Credit Unions

3. Air carriers

4. Creditors Subject to Surface Transportation Board

5. Creditors Subject to Packers and Stockyards Act, 1921

6. Small Business Investment Companies

7. Brokers and Dealers

8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations

9. Retailers, Finance Companies, and All Other Creditors Not Listed Above

CONTACT:

a. Consumer Financial Protection Bureau
1700 G Street NW
Washington, DC 20552

b. Federal Trade Commission: Consumer Response Center – FCRA
Washington, DC 20580
(877) 382-4357

a. Office of the Comptroller of the Currency
Customer Assistance Group
1301 McKinney Street, Suite 3450
Houston, TX 77010-9050

b. Federal Reserve Consumer Help Center
P.O. Box 1200
Minneapolis, MN 55480

c. FDIC Consumer Response Center
1100 Walnut Street, Box #11
Kansas City, MO 64106

d. National Credit Union Administration
Office of Consumer Protection (OCP)
Division of Consumer Compliance and Outreach (DCCO)
1775 Duke Street
Alexandria, VA 22314

Asst. General Counsel for Aviation Enforcement & Proceedings
Aviation Consumer Protection Division
Department of Transportation
1200 New Jersey Avenue, SE
Washington, DC 20590
Office of Proceedings, Surface Transportation Board
Department of Transportation
395 E Street S.W.
Washington, DC 20423

Nearest Packers and Stockyards Administration area supervisor

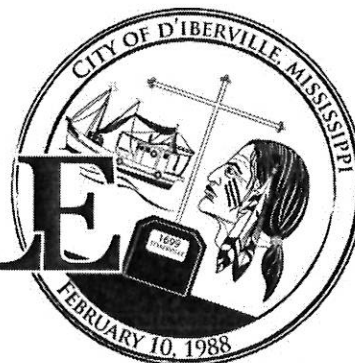
Associate Deputy Administrator for Capital Access
United States Small Business Administration
409 Third Street, SW, 8th Floor
Washington, DC 20416

Securities and Exchange Commission
100 F St NE
Washington, DC 20549

Farm Credit Administration
1501 Farm Credit Drive
McLean, VA 22102-5090

FTC Regional Office for region in which the creditor operates or
Federal Trade Commission: Consumer Response Center – FCRA
Washington, DC 20580
(877) 382-4357

CITY OF D'IBERVILLE



DISCLOSURE REGARDING BACKGROUND INVESTIGATION

City of D'Iberville, MS ("the Company") may obtain information about you from a third party consumer reporting agency for employment purposes. This information may be obtained in the form of a "consumer report" and/or an "investigative consumer report" (commonly known as a "background report"). These reports may contain information regarding your criminal history, social security verification, motor vehicle records ("driving records"), credit history*, verification of your education or employment history, drug screening or other background checks. This information may be obtained from private and public record sources, including, as appropriate: government agencies and courthouses and educational institutions. The reports may also include information about your character, general reputation, personal characteristics, mode of living, etc., which can involve personal interviews with individuals or companies that you have listed as a reference, former employer, etc. A more comprehensive background investigation may be required pursuant to state or federal law, contract agreement or for certain sensitive positions (such as those with significant financial responsibilities). (*Please note that credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying.)

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of any investigative consumer report obtained with regard to applicants for employment is an investigation conducted by Reference Services, Inc. (RSI). RSI is located and can be contacted by mail at 101 Plaza East Blvd, Suite 300, Evansville, IN 47715, and RSI can be contacted by phone at (800)881-0754. Information about RSI's privacy policy is available at the following link: <http://www.referenceservices.com/wp-content/uploads/2013/09/RSI-Consumer-Information-Privacy-Policy.pdf>. The scope of this notice and authorization is all-encompassing and allows the Company to obtain from any outside organization all manner of consumer reports throughout the course of your employment or your contract period to the extent permitted by law.

Signature: _____ Date: _____

ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

I acknowledge receipt of the separate document entitled "Disclosure Regarding Background Investigation" and "A Summary of Your Rights under the Fair Credit Reporting Act" and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by City of D'Iberville, MS at any time after receipt of this authorization and throughout my employment, or status as an Advisor, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all drug screening and background information requested by Reference Services, Inc. [101 Plaza East Blvd, Suite 300, Evansville, IN 47715, (800)881-0754, www.referenceservices.com] and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

New York applicants only: Upon request, you will be informed whether or not a consumer report was requested by the Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law

Washington State applicants only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Minnesota and Oklahoma applicants only:

Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

California applicants only:

Under California Civil Code section 1786.22, you are entitled to find out what is in the CRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The CRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the CRA file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. CRAs complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the CRAs.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the CRA require additional information concerning your employment and personal or family history in order to verify your identity. The CRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection. You may be accompanied by one other person of your choosing, who must furnish reasonable identification. A CRA may require you to furnish a written statement granting permission to the CRA to discuss your file in such person's presence.

Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

BACKGROUND INFORMATION

Last Name _____ First _____ Middle _____

Other Names/Aliases Used _____

Social Security Number* _____ Date of Birth* _____

Driver's License Number _____ State of Driver's License _____

Current Address - City, State, Zip _____

Previous Address - City, State Zip _____

Previous Address - City, State Zip _____

Phone Number _____ Email Address _____

Permission to contact current employer for employment and reference verifications: Yes No

Signature _____ Date _____

*This information will be used as identification for background screening purposes only and will not be used as hiring criteria.