

City of Peoria

EMPLOYMENT APPLICATION (AN EQUAL OPPORTUNITY EMPLOYER)

Professional
Ethical
Open
Responsive
Innovative
Accountable



Location & mailing info: 8401 W. Monroe St., Rm.110
Peoria, Arizona 85345
Phone: (623) 773-7100
24 hr. Job Hotline (623) 773-7105
Website: www.peoriaaz.com

All requested information must be furnished. The information you provide will determine whether you are eligible for the position or further examination process. All information contained on the application is subject to verification. Any omission, misstatement or falsification may be cause for rejection of this application, removal of your name from an eligibility list, or discharge from City service. Applications will be accepted only when positions are open.

GENERAL INFORMATION (Please type or print legibly with ink)

Position applying for: _____

Name: _____
(Last) (First) (Middle Initial)

Address: _____
(Street) (City/State) (ZIP)

Phone: _____
(Home) (Work) (Cell/Message)

E-Mail Address: _____ (Please indicate best contact number)

THIS BLOCK FOR POLICE POSITIONS ONLY

Are you a U.S. citizen? Yes No Are you 21 or over? Yes No

Are you currently a regular City of Peoria employee? Yes No Employee # _____

Are any of your relatives (to include by marriage) employed by the City of Peoria? Yes No
If so, what Department/Division? _____

Have you ever been convicted of any violations (including traffic) of federal, state, local, or military law or statute?
 Yes No If yes, explain in the space provided (if needed, attach separate page). _____

NOTE: CONVICTION IS NOT NECESSARILY A BAR TO EMPLOYMENT. EACH CASE IS CONSIDERED INDIVIDUALLY, BASED UPON JOB REQUIREMENTS.

Do you have a legal right to work in the U.S.? Yes No If yes, you will need to show proof of work eligibility to be employed. See Immigration Reform Act on page four for more information on this requirement.

Have you ever been terminated or forced to resign due to misconduct or unsatisfactory service? Yes No
If yes, please explain the circumstances: _____

What work status will you accept? (Please check all that apply)

Regular
 Full-time Part-time
 Shift: 8:00 a.m. – 5:00 p.m. only
 Evenings Nights Rotating

If appointed, when could you start work? _____

Where did you learn about this job? (Please check all that apply)

1. Peoria Website 2. Peoria Job Hotline
3. City Employee 4. Walk-in
5. Newspaper _____
6. Other _____

Did you obtain a HS Diploma or GED? YES NO

Colleges/University	City/State	Major Coursework	Sem. Hours	Degree(s) Completed

Professional Certifications, Licenses or Memberships: _____

- List any specialized training you may have received that relates to this position (include number of hours and course content): _____

- List any computer software training you have received: _____

- List any equipment that you are able to operate that relates to this position: _____

Language Proficiency (other than English)

Language	Speak	/	Read	/	Write
_____	_____	/	_____	/	_____
_____	_____	/	_____	/	_____
_____	_____	/	_____	/	_____

Have you ever served in the U.S. Armed Forces?
 Yes No From: _____ to _____
 (mo/yr) (mo/yr)

Type of discharge: _____
 Specialized training or experience: _____

EXPERIENCE

Begin with your present or most recent position. List all jobs held, paid or volunteer, over the last ten years. Your qualifications will be evaluated on the basis of the information provided on this application. You may attach a separate sheet if additional space is needed, or to include applicable experience prior to ten years ago.

Resumes may not be substituted for the requested information.

EMPLOYER NAME/ADDRESS	List All Positions Held	Annual Salary	Dates Mo/Yr – Mo/Yr	Hours Per Week
Supervisor				
Phone Number				

May we contact your employer? _____ Primary job duties:

Reason for leaving or, if still there, reason for wanting to leave: _____

Total Time Worked: _____ Years _____ Months

EMPLOYER NAME/ADDRESS	List all Positions Held	Annual Salary	Dates Mo/Yr – Mo/Yr	Hours Per Week
Supervisor				
Phone Number				
May we contact your employer? _____ Primary job duties: _____				

Reason for leaving: _____				
Total Time Worked: _____ Years _____ Months				

EMPLOYER NAME/ADDRESS	List all Positions Held	Annual Salary	Dates Mo/Yr – Mo/Yr	Hours Per Week
Supervisor				
Phone Number				
May we contact your employer? _____ Primary job duties: _____				

Reason for leaving: _____				
Total Time Worked: _____ Years _____ Months				

EMPLOYER NAME/ADDRESS	List all Positions Held	Annual Salary	Dates Mo/Yr – Mo/Yr	Hours Per Week
Supervisor				
Phone Number				
May we contact your employer? _____ Primary job duties: _____				

Reason for leaving: _____				
Total Time Worked: _____ Years _____ Months				

READ THIS APPLICATION AND VERIFY YOUR ANSWERS BEFORE SIGNING BELOW

By signing this application, I certify all information on this form is true to the best of my knowledge, and any omissions or misstatements of facts may be cause for rejection of this application or discharge from City service.

I also authorize the City of Peoria Human Resources or its designee to make all necessary and appropriate investigations allowable by law to verify the information provided and for any past employer to release all factual information concerning my employment that is allowable by law. It is my responsibility to keep the Human Resources Department advised of changes of address or phone number.

DATE: _____ SIGNATURE: _____

TO ALL APPLICANTS: The City of Peoria is an Affirmative Action/Equal Opportunity/ Reasonable Accommodation Employer. The information that you provide on this profile is used for statistical purposes in complying with record keeping requirements of the Federal Government to assure equal employment opportunity in the City's hiring practices. This profile will be filed separately from your application and will not be used to discriminate in any way in the employment process. Although completion of this profile is not mandatory, your assistance will help us to study and improve our recruitment policies. THANK YOU.

CITY OF PEORIA APPLICANT PROFILE

TITLE OF POSITION APPLIED FOR: _____

TODAY'S DATE: _____

LAST NAME FIRST NAME INITIAL

ADDRESS CITY/STATE ZIP

DO YOU CONSIDER YOURSELF OR DO OTHERS CONSIDER YOU TO BE DISABLED?

YES NO

VETERAN? YES NO

VIETNAM OTHER _____ DISABLED _____%

SEX 1. FEMALE 2. MALE

AGE _____

ETHNIC GROUP

1. WHITE 2. BLACK 3. HISPANIC 4. ASIAN AMERICAN

5. NATIVE AMERICAN 6. OTHER (SPECIFY) _____

EMPLOYMENT POLICY

Applicants are considered solely on the basis of their qualifications as required for the position they seek, and no discrimination is exercised because of their political or religious opinions or affiliations, or because of their race, creed, color, gender, sex, national origin, age, disability, veteran status or marital status. A standard twelve-month probationary period must be served. However, it may be extended depending on incumbent performance. Applications will be accepted for current vacancies only until closing date, or until a sufficient number of applications have been received.

IMMIGRATION REFORM ACT NOTICE

To conform with the Immigration Reform Act of 1986, the City of Peoria must verify the right to work in the United States of every individual hired.

IN THE EVENT YOU ARE SELECTED, YOU WILL BE REQUIRED TO PROVIDE THE APPROPRIATE DOCUMENTS TO HUMAN RESOURCES. FAILURE TO PROVIDE THESE DOCUMENTS WILL RESULT IN TERMINATION.

EVALUATION

You will be required to meet City of Peoria standards on experience, training, knowledge, skills, physical fitness and other job related requirements as they relate to the position applied for. ONLY the most highly qualified applications will be considered for this position. (Usually those possessing directly related experience.)

GENERAL INFORMATION

The City of Peoria, Arizona, utilizes a Council-Manager form of government with a Mayor and six Council Members. The annual fiscal year budget totals over \$375 million. The City employees approximately 898 full-time employees. The population is approximately 120,000.

BENEFITS

- *Paid Holidays (10 days per year)
- *Paid Vacation (10 days 1st through 4th year, progressive to 20 days after the 15th year of employment)
- *Paid Sick Leave (12 days per year-accumulative to 1025 hours)
- *Social Security
- *Arizona State Retirement System (general employment)
- *Public Safety Retirement System (Certified Police and Fire employment)
- *Deferred Compensation Program
- *Major Medical, Dental, Vision and Life Insurance Program
- *Flexible Spending Account
- *Retiree Health Savings Account
- *Long-Term Disability
- *Employee Assistance Program
- *Industrial Insurance
- *Safety Awards
- *Employee Suggestion Program (City of Peoria's Innovation Program)
- *Credit Union
- *Education Reimbursement Program
- *Uniform Allowance (as determined by policy)
- *Wellness Program