



City of Markham

Employment Application

APPLICANT INFORMATION

Last Name	First	M.I.	Date	
Street Address	Apartment/Unit #			
City	State	ZIP		
Phone	E-Mail Address			
Date Available	Social Security	Desired Salary		
Position Applied for				
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Is yes, explain	

EDUCATION

High School	Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College	Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other	Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	

PREVIOUS EMPLOYMENT

Company				Phone	()			
Address				Supervisor				
Job Title			Starting Salary	\$			Ending Salary	\$
Job Responsibilities								
From		To		Reason for leaving				
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
Company				Phone	()			
Address				Supervisor				
Job Title			Starting Salary	\$			Ending Salary	\$
Job Responsibilities								
From		To		Reason for leaving				
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	
Company				Phone	()			
Address				Supervisor				
Job Title			Starting Salary	\$			Ending Salary	\$
Job Responsibilities								
From		To		Reason for leaving				
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	

MILITARY SERVICE

Branch				From		To	
Rank at Discharge				Type of Discharge			
If other than honorable, explain							

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature				Date	
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