

City of Audubon Park, Kentucky
3340 Robin Road
Audubon Park, KY 40213
Business Office: 502-637-5066
Business FAX: 502-637-1574
EMAIL: clerk@audubonparkky.org

APPLICATION FOR EMPLOYMENT APPLICATION CHECKLIST

For proper processing, each page in this packet must be printed on a separate sheet of paper. Double-sided copies are not acceptable.

The following checklist is intended to help you properly complete the process of applying for employment with the City of Audubon Park. **Read this checklist and any instruction sheets in their entirety before beginning the application.**

- Read both pages of this Application Checklist
- Read the Application for Employment Form Instructions
- Complete the Application for Employment form according to the Application for
- Employment Form Instructions. **The Employment Experience Section must be completed by all applicants.**
 - If necessary, print and complete additional pages for employment history as described in the Application for Employment Instructions.
- If you are applying for more than one position, complete the Multiple Application Form, listing all of the positions for which you are applying. If you are not applying for more than one position, then the Multiple Application Form can be discarded. Complete the top portion of the Results Form. Be certain to read the items at the bottom of the form.
 - If you are applying for more than one position, complete a separate Results Form for each position for which you are applying. Print out additional copies of the Results Form as necessary
- Complete the Authorization for Record Check
- Read the Applicant Tracking Sheet, and complete the sheet if you choose to do so. **Completion of the Applicant Tracking Sheet is strictly voluntary.**
- Complete the top portion of the Confidential Reference Request. Complete only the items in the shaded portion of this form. You should complete a separate Confidential Reference Request for each previous job you list in the Employment Experience Section of the Application for Employment form.

- If you require additional copies of the Confidential Reference Request, print additional copies of that page of the packet. Confidential Reference Request forms are not needed for employers that are now out of business or for current employers you do not want us to contact.

- Carefully review each document for completeness and signature.**

- Enclose copies of any required documentation specified in the job posting or other public advertisements (i.e., high school diploma/GED, college transcripts, driver's license, etc.).

- If you wish, enclose a resume'. The resume' will provide additional information, but **may not be substituted for any part of the application packet.**

- Bring your completed application to our office (at the address listed below) by the filing deadline, or enclose all application materials in a suitable envelope and send via mail or delivery service to the address below. **Additional postage may be required.** If a position for which you are applying has a Filing Deadline, then your application **must be received** in the Office of the City Clerk by that deadline. Your application will not be considered if it does not meet the deadline.

**City of Audubon Park
Office of the City Clerk
3340 Robin Road
Audubon Park, KY 40213**

AN EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR EMPLOYMENT INSTRUCTIONS

The following set of instructions are intended to help you fill out the application for employment with the City of Audubon Park. If you need special accommodations or assistance with filling out the application, ask the City Clerk. **You MUST follow these instructions as closely as possible. It is YOUR responsibility to provide those who review the application with enough information to determine whether or not you meet the minimum qualifications.** Some positions require proof of education, verification of address, a birth certificate, professional licenses and certificates, and verification of a valid driver's license. These requirements will be listed on the posting and other public advertisements. You must provide a copy of the required document when submitting your application. **APPLICATIONS WITHOUT THE REQUIRED DOCUMENTATION WILL DELAY PROCESSING OR COULD RESULT IN DISQUALIFICATION.** Do not leave any blanks. Put N/A in any space not applicable to you. Please use blue or black ink pen. If you have any questions, ask the City Clerk. If you are at home, call the City Clerk at 502-637-5066.

Page 1:

A) **TITLE OF POSITION**

List the position for which you are applying. If you are applying for more than one position, leave the Title of Position blank, and complete the separate Multiple Application Form contained in this packet. List all of the positions for which you are applying on the Multiple Application Form.

B) **SOCIAL SECURITY NUMBER / DATE OF APPLICATION/PERSONAL INFORMATION**

List your Social Security Number, Date of Application and all Personal Information, (name, address, mailing address, phone and email) as we may need to contact you regarding your application. (This information is protected and secured).

C) **RELATED INFORMATION**

Please complete this related information, (previous applications/employment with the City, prior names known by, and other requested information). Complete to the best of your knowledge.

Page 2:

A) **TYPE/HOURS OF EMPLOYMENT**

Please provide your preference of employment days and times. (NOTE: As some positions require specific hours and days of operation work schedules cannot be changed to accommodate applicant needs)

B) **LICENSE AND CERTIFICATES**

For Trade or Professional license or certificates, provide license number or certificate numbers, the issuing agency, group, board, or committee and expiration dates where applicable. If additional space is needed, use a separate sheet of paper.

C) **EDUCATION AND TRAINING**

Indicate highest grade level completed. For all indicated levels of education, provide school names, addresses, dates attended & dates of graduation. For college, indicate number of hours completed (semester or quarter), major course of study, minors, and the name(s) of the degree(s). Provide documentation to verify your education.

D) **SPECIALIZED EQUIPMENT AND MACHINERY**

List any specialized equipment and machinery in which you have operations experience. (i.e., office equipment, postage meters, personal computers, video equipment, heavy equipment – bulldozers, backhoes)

Page 3-4:

A) **WORK EXPERIENCE**

Beginning with present or most recent job. Do not leave out any employment experience. You may include verifiable volunteer experience. Be sure to indicate ALL required information, i.e. dates of employment, name of employer, address (including ZIP Code), phone number, title of position, hours worked per week, name of supervisor, etc. Describe your duties and responsibilities in as much detail as possible. Failure to provide sufficient information may result in your application being disqualified. If you need additional sheets, print out as many copies of the Employment Experience page as you need, or see the City Clerk.

B) **SIGNATURE**

Complete the application by reading the disclaimer and signing the application. Applications which are unsigned cannot be processed and could cause delays in your employment opportunities.

EMPLOYMENT APPLICATION

(THIS FORM MAY BE TYPED & PRINTED USING ADOBE READER BUT CAN NOT BE SAVED)

PRINT IN INK OR TYPE. Answer each item completely and accurately.
 Incomplete answers may disqualify you or cause delays. **FALSE**
 answers may lead to disqualification of this application or dismissal.

TITLE OF POSITION(DO NOT ANSWER: OFFICIAL USE ONLY)

(Leave Blank only if applying for more than one position)

POSTING TYPE

JOB CLASS CODE

SOCIAL SECURITY NUMBER:		DATE:	
NAME (FIRST)	MIDDLE	LAST	SUFFIX (JR/SR)
HOME ADDRESS (Number and Street)			APT. #
CITY	STATE	ZIP	COUNTRY
PHONE HOME: _____ OTHER: _____	EMAIL ADDRESS: _____@_____		

MAILING ADDRESSES (IF DIFFERENT FROM ABOVE)

CITY	STATE	ZIP CODE
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HAVE YOU PREVIOUSLY APPLIED FOR EMPLOYMENT WITH THE CITY OF AUDUBON PARK?	YES	NO
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IF SO, HAS IT BEEN WITHIN THE PAST :	SIX MONTHS	TWELVE MONTHS	LONGER
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PRIOR OR ADDITIONAL NAMES KNOWN BY	FOR POSITIONS WHICH REQUIRE "PEACE OFFICER" STATUS ONLY: 21 OR OLDER: YES NO US CITIZEN: YES NO
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DO YOU HAVE RELATIVES THAT WORK FOR THE CITY OF AUDUBON PARK?	YES	NO
RELATIVE'S NAME: _____RELATIONSHIP: _____DEPT. _____		
RELATIVE'S NAME: _____RELATIONSHIP: _____DEPT. _____		

Military Experience: Yes No Branch of Service: _____

What type of work are you seeking? Regular Temporary Part Time Full Time

(Please check all that apply) Desired Shift(s) Days Evenings Nights Any

DRIVER'S LICENSE (List Driver's License if the position sought requires a Driver's License)

STATE OF ISSUE DATE	ISSUE DATE	LICENSE #	TYPE	EXPIRATION	VERIFIED

LICENSE/CERTIFICATES

LICENSE & CERTIFICATES	ISSUE DATE	LICENSE #	CITY/STATE/COUNTY	EXPIRATION DATE	VERIFIED

FORMAL TRAINING / EDUCATION

SCHOOL TYPE	SCHOOL NAME, CITY & STATE	DATE ATTENDED TO: _____ FROM: _____	MAJOR/MINOR	LEVEL ACHIEVED	DIPLOMA/GRADUATION
GRADE/MIDDLE					COMPLETED 8 th GRADE? YN
HIGH SCHOOL/ GED					EARNED DIPLOMA/ GED? Y N
VOCATIONAL/ BUSINESS/ MILITARY				*SEM/QTR CLOCK HRS	# CERT. EARNED
UNDERGRADUATE COLLEGE OR UNIVERSITY				*SEM/QTR CLOCK HRS	# CERT. EARNED
GRADUATE SCHOOL				*SEM/QTR CLOCK HRS	# CERT. EARNED
OTHER				*SEM/QTR CLOCK HRS	# CERT. EARNED

* PLEASE CIRCLE IF SEMESTER, QUARTER OR CLOCK HOURS. # PLEASE NOTE THAT EDUCATIONAL REQUIREMENTS MUST BE VERIFIED WITH APPROPRIATE DOCUMENTATION, WHICH MAY INCLUDE A DIPLOMA, CERTIFICATE AND/OR TRANSCRIPT.

PLEASE LIST ANY OFFICE MACHINES AND/OR EQUIPMENT YOU CAN OPERATE

EMPLOYMENT EXPERIENCE: Begin with your most recent job and describe in detail each specific job, including any military service or volunteer experience you may have had. It is very important that you describe your duties and responsibilities under each position listed. If you moved to a different position within the same organization so that your duties changed significantly, then describe that as a separate job. **You must provide this information on the application, as resumes are not considered as official information.**

REQUEST ADDITIONAL FORMS, IF NEEDED, TO COMPLETE EMPLOYMENT HISTORY

EMPLOYER:		DATES EMPLOYED		MM/DD/YY	MM/DD/YY
		FROM:		/ /	TO / /
POSITION TITLE	EMPLOYER ADDRESS				
PHONE # ()	CITY	STATE		ZIP CODE	
HOURS WORKED PER WEEK	NAME OF SUPERVISOR		SUPERVISOR TITLE		
REASON FOR LEAVING			MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO		
IF YOU SERVED AS A SUPERVISOR, LIST DATES		FROM / /		TO / /	
DUTIES AND RESPONSIBILITIES:					

EMPLOYER:		DATES EMPLOYED		MM/DD/YY	MM/DD/YY
		FROM:		/ /	TO / /
POSITION TITLE	EMPLOYER ADDRESS				
PHONE # ()	CITY	STATE		ZIP CODE	
HOURS WORKED PER WEEK	NAME OF SUPERVISOR		SUPERVISOR TITLE		
REASON FOR LEAVING			MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO		
IF YOU SERVED AS A SUPERVISOR, LIST DATES		FROM / /		TO / /	
DUTIES AND RESPONSIBILITIES:					

EMPLOYER:		DATES EMPLOYED		MM/DD/YY	MM/DD/YY
		FROM:		/ /	TO / /
POSITION TITLE	EMPLOYER ADDRESS				
PHONE # ()	CITY	STATE	ZIP CODE		
HOURS WORKED PER WEEK	NAME OF SUPERVISOR	SUPERVISOR TITLE			
REASON FOR LEAVING		MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO			
IF YOU SERVED AS A SUPERVISOR, LIST DATES		FROM	/ /	TO	/ /
DUTIES AND RESPONSIBILITIES:					

EMPLOYER:		DATES EMPLOYED		MM/DD/YY	MM/DD/YY
		FROM:		/ /	TO / /
POSITION TITLE	EMPLOYER ADDRESS				
PHONE # ()	CITY	STATE	ZIP CODE		
HOURS WORKED PER WEEK	NAME OF SUPERVISOR	SUPERVISOR TITLE			
REASON FOR LEAVING		MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO			
IF YOU SERVED AS A SUPERVISOR, LIST DATES		FROM	/ /	TO	/ /
DUTIES AND RESPONSIBILITIES:					

I certify under penalty of law, that the information given in this application is correct and complete to the best of my knowledge. I am aware that, should investigation at any time show falsification, I will not be eligible for employment, and if already employed, subject to termination, authorize the City of Audubon Park to make all necessary investigations and further authorize and request each former employer, or organization (including law enforcement agencies) to provide all information that may be sought in connection with this application or concerning me, my work habits, character, or my action in any transaction.

SIGNATURE: _____ DATE: _____

CITY OF AUDUBON PARK
3340 Robin Road
Audubon Park, Kentucky 40213

MULTIPLE APPLICATION FORM
(PRINT OR TYPE IN INK)

(THIS FORM MAY BE TYPED & PRINTED USING ADOBE READER BUT CAN NOT BE SAVED)

NAME (LAST)

DATE:

FIRST NAME:

MIDDLE NAME

JR/SR

SOCIAL SECURITY NUMBER:

TITLE OF POSITIONS FOR WHICH YOU ARE APPLYING

Thank you for applying for employment with the City of Audubon Park
An Equal Opportunity Employer

City of Audubon Park
3340 Robin Road
Audubon Park, KY 40213

RESULTS FORM

Name

Address

City State Zip Code

Position Applied For: _____

FOR OFFICE USE ONLY

You have been selected for an interview. Please contact _____
_____ at (502) 637-5066.

Please bring with you proof of

High School Diploma/GED

Driver's License

Picture I.D.

Other: _____

The position has been withdrawn and will not be filled at this time.

The position has been filled

Your application has been disqualified for failing to meet minimum requirements
for:

Education

Experience

License/Certification

Other _____

You may contact us at (502) 637-5066 or visit our web site at www.audubonparkky.org
for a list of openings that may interest you. You may also contact us via email at
clerk@audubonparkky.org

NOTE: Please bring this letter with you if you have been scheduled for an interview. If you have
any questions, you may call (502) 637-5066

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AUTHORIZATION FOR RECORD CHECK

(THIS FORM MAY BE TYPED & PRINTED USING ADOBE READER BUT CAN NOT BE SAVED)

POSITION(S) DESIRED: _____

PLEASE PRINT FULL NAME CLEARLY (Including Middle Initial)

Name: _____

Social Security Number: _____

Current Address: _____

City: State: ZIP Code: _____

Previous Address (If less than three years at current address) _____

City: _____ State: _____ ZIP Code: _____

Date of Birth: _____ / _____ / _____ (REQUIRED)
Month Day Year

Maiden/Previous/Other Names: _____

I, _____, do hereby authorize the Louisville Division of Police, Jefferson County Police Department, Jefferson County Sheriff's Office, Kentucky State Police, Administrative Office of the Courts, and any and all other local, state or federal law enforcement agencies to search their record(s) of any conviction(s) or arrest(s) they may have regarding me, and to make this information available to the City of Audubon Park. This information is necessary in order that the above mentioned can pass his/her application for employment.

SIGNATURE: _____ DATE: _____

AN EQUAL OPPORTUNITY EMPLOYER

**City of Audubon Park
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CONFIDENTIAL REFERENCE REQUEST

(THIS FORM MAY BE TYPED & PRINTED USING ADOBE READER BUT CAN NOT BE SAVED)

**APPLICANT TO COMPLETE SHADED AREA
PRINT IN INK OR TYPE**

Company Name: _____

Address: _____

City: State: ZIP Code: _____

I have applied to the City of Audubon Park for employment in the position of and I desire that they be fully advised of my record with former employers. I, therefore, respectfully request that you furnish the necessary information concerning my employment with your organization, and I hereby release you from any and all liability of damages for providing the information requested.

NAME: _____

OTHER NAME KNOWN BY: _____

SOCIAL SECURITY NUMBER: _____

POSITION HELD: _____

EMPLOYMENT DATES: FROM: ____ / ____ / ____ TO: ____ / ____ / ____

AVERAGE NUMBER OF HOURS WORKED PER WEEK: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

(to be signed in ink)

We appreciate your response to the questions below. All information will be held in strict confidence for our own use and benefit, without prejudice or liability on your part. A stamped, self-addressed envelope is enclosed for your convenience.

COMPANY RESPONSE

Are the "Position Held", "Employment Dates", and the "Average Number of Hours Worked Per Week" correct? Yes No

If not, please supply correct information:

EMPLOYMENT DATES: FROM: __ / ____ / ____ TO: ____ / ____ / ____

POSITION HELD: _____

AVERAGE NUMBER OF HOURS WORKED PER WEEK: _____

PRINTED NAME: TITLE: _____

SIGNATURE: _____ DATE: _____

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OTHER NAME KNOWN BY: _____

SOCIAL SECURITY NUMBER: _____

POSITION HELD: _____

EMPLOYMENT DATES: FROM: ____ / ____ / ____ TO: ____ / ____ / ____

AVERAGE NUMBER OF HOURS WORKED PER WEEK: _____

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EMPLOYMENT DATES: FROM: __ / ____ / ____ TO: ____ / ____ / ____

POSITION HELD: _____

AVERAGE NUMBER OF HOURS WORKED PER WEEK: _____

PRINTED NAME: TITLE: _____

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OTHER NAME KNOWN BY: _____

SOCIAL SECURITY NUMBER: _____

POSITION HELD: _____

EMPLOYMENT DATES: FROM: ____ / ____ / ____ TO: ____ / ____ / ____

AVERAGE NUMBER OF HOURS WORKED PER WEEK: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

(to be signed in ink)

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COMPANY RESPONSE

Are the "Position Held", "Employment Dates", and the "Average Number of Hours Worked Per Week" correct? Yes No

If not, please supply correct information:

EMPLOYMENT DATES: FROM: __ / ____ / ____ TO: ____ / ____ / ____

POSITION HELD: _____

AVERAGE NUMBER OF HOURS WORKED PER WEEK: _____

PRINTED NAME: TITLE: _____

SIGNATURE: _____ DATE: _____

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SOCIAL SECURITY NUMBER: _____

POSITION HELD: _____

EMPLOYMENT DATES: FROM: ____ / ____ / ____ TO: ____ / ____ / ____

AVERAGE NUMBER OF HOURS WORKED PER WEEK: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

(to be signed in ink)

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POSITION HELD: _____

AVERAGE NUMBER OF HOURS WORKED PER WEEK: _____

PRINTED NAME: TITLE: _____

SIGNATURE: _____ DATE: _____