



**Please return by mail, fax or email to:**

City of Goshen, Human Resources Department, 204 East Jefferson Street, Suite 3  
Goshen, Indiana 46528, Fax: (574) 534-2410 [humanresources@goshencity.com](mailto:humanresources@goshencity.com)

**Employment Application** Incomplete information could disqualify you from further consideration.

**Position Applied For:**

**Applicant Information**

Full Name: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Date Available: \_\_\_\_\_

Are you eligible to work in the US? YES  NO

Are you at least 18 years of age? YES  NO

If no, can you furnish a work permit? YES  NO

If the position you are applying for requires the operation of a motor vehicle, do you possess a valid driver's license? N/A  YES  NO

Type of license (Check one):  Operator's License  Commercial Driver's License, Class \_\_\_\_\_

License number: \_\_\_\_\_ Expiration date: \_\_\_\_\_ State: \_\_\_\_\_

Have you ever been convicted of a criminal offense (felony or misdemeanor) that has not been overturned, expunged or sealed by a court? YES  NO

If yes, please explain: \_\_\_\_\_

*Note: A criminal conviction may not necessarily disqualify you from consideration for employment, but a false statement will.*

**Education**

High School Name and Location: \_\_\_\_\_

Diploma/GED: \_\_\_\_\_ Major/Concentration: \_\_\_\_\_

College Name and Location: \_\_\_\_\_

Degree Completed: \_\_\_\_\_ Major/Concentration: \_\_\_\_\_

College Name and Location: \_\_\_\_\_

Degree Completed: \_\_\_\_\_ Major/Concentration: \_\_\_\_\_

**Vocational/Certifications/Other Training**

School Name and Location: \_\_\_\_\_

Title of Course/Certificate: \_\_\_\_\_

List any other education, skills, training, licenses or certifications that you have or languages that you speak, read or write which will be of special benefit in the position for which you are applying. If space below is not sufficient, please attach an additional page.

\_\_\_\_\_  
\_\_\_\_\_

**Employment: starting with most recent (attach add'l pages if needed)**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Ending Wage: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Ending Wage: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

If currently employed, may we contact your current employer for a reference? YES NO

**References**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_ Capacity Known: \_\_\_\_\_  
Name: \_\_\_\_\_ Telephone: \_\_\_\_\_ Capacity Known: \_\_\_\_\_  
Name: \_\_\_\_\_ Telephone: \_\_\_\_\_ Capacity Known: \_\_\_\_\_

How did you hear about this job opening:

Elkhart Truth  Goshen News  El Puente  Indeed  Monster  Goshen City Website  Other

Are you related to any City of Goshen employee? YES NO If yes, provide name and relationship: \_\_\_\_\_  
   \_\_\_\_\_

Are you currently or were you previously employed by the City of Goshen? YES NO If yes, by what department? \_\_\_\_\_  
   \_\_\_\_\_

I represent that all of the information provided by me in support of my application for employment is true and complete. I authorize the City of Goshen to verify any information concerning my background. I authorize the education institutions and employers listed to give the City of Goshen information regarding my background.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_