Application For Employment

Cedar City Corporation • 10 N Main Street • Cedar City, UT 84720 • (435) 865-2880

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For | Date of Application

How Did You Learn About Us?

☐ Advertisement ☐ Employment Agency ☐ Walk-In ☐ Other _____

Last Name First Name Middle Name

Address *Number* *Street* *City* *State* *Zip Code*

Mailing Address (if different) | Email Address

Telephone Number(s)

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

Have you ever filed an application with us before? ☐ Yes ☐ No

If Yes, give date _____

Have you ever been employed with us before? ☐ Yes ☐ No

If Yes, give date _____

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in the country because of Visa or Immigration Status? ☐ Yes ☐ No

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary

Are you a veteran or spouse of a veteran? ☐ Yes ☐ No

Can you travel if a job requires it? ☐ Yes ☐ No

Have you been convicted of a felony within the last 7 years? ☐ Yes ☐ No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

_____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

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

Indicate any foreign languages you can speak and/or read

	FLUENT	GOOD	FAIR
SPEAK			
READ			

Describe any specialized training, apprenticeship, skills and extra-curricular activities:

_____

_____

_____

Describe any job-related training received in the United States Military:

_____

_____

_____

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

_____

_____

_____

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Computer Equipment/Software:_____

_____

Equipment:_____

_____

Employment Experience

Start with your present or last job. Complete all sections.

Employer	From	To	Work Performed
Address	Beg. Salary	End. Salary	
Telephone Number(s)			
Job Title	Supervisor:		
Reason for Leaving			

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Address	Beg. Salary	End. Salary	
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Address	Beg. Salary	End. Salary	
Telephone Number(s)			
Job Title	Supervisor:		
Reason for Leaving			

References

1. Name:_____ Phone # ( )_____

Address:_____

2. Name:_____ Phone # ( )_____

Address:_____

3. Name:_____ Phone # ( )_____

Address:_____

Note to Applicants: PLEASE ANSWER THIS QUESTION AFTER YOU HAVE REVIEWED THE DUTIES AND PHYSICAL REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing, with or without a reasonable accommodation, the activities involved in the job for which you have applied? A description of the activities involved in such a job can be obtained from the Cedar City Office.

_____ Yes _____ No

Reasonable Accommodation: _____

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

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

In the event of employment, I understand that false or misleading information given in my application or interview(s) will result in discharge. I understand, also, that I am required to abide by all rules, regulations and policies of the Cedar City Corporation.

_____ _____

_____Signature of Applicant Date

Applications may be mailed to:
Cedar City Corporation
10 N Main
Cedar City, UT 84720
(435) 865-2880

Applications must be received prior to deadline date to qualify.
No application will be considered if received after deadline.
Applicants will be notified in writing.