City of Albion
Est. 1895

225 S Main St. | PO Box 147 | Albion, ID 83311
Email: info@albionidaho.gov | Website: www.albionidaho.gov

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability, or national origin.

PERSONAL INFORMATION

Date: _____

Full Name (Last, First, Middle): _____

Present Address (Street, City, State, Zip): _____

Permanent Address (If different): _____

Home Phone Number: _____ Cell Phone Number: _____ Email Address: _____

Are you 18 years of age or older? ☐ Yes ☐ No Are you legally authorized to work in the United States? ☐ Yes ☐ No

EMPLOYMENT DESIRED

Position Desired: _____ Date You Can Start: _____ Salary Desired: _____

Are you employed now? ☐ Yes ☐ No If so, may we inquire of your present employer? ☐ Yes ☐ No

Have you ever applied to the City of Albion before? ☐ Yes ☐ No If yes, when? _____

If Referred : Referred By: _____

EDUCATION

Education Level	Name & Location of School	Years Completed	Did you Graduate? (Y/N)	Subjects Studied / Degree
High School				
College				
Trade / Business / Grad				

GENERAL SKILLS & QUALIFICATIONS

Subjects of Special Study or Research Work: _____

_____

Job Related Skills (e.g., specific software, heavy machinery, foreign languages): _____

_____

_____

Certifications / Licenses (e.g., Driver's License, CDL, CPR): _____

EMPLOYMENT HISTORY (List last four employers, starting with most recent)

Date (Mo/Yr) From - To	Name & Address of Employer	Supervisor	Position	Salary (Leaving)	Reason for Leaving

REFERENCES (List three persons not related to you, known at least one year)

Name	Address / Email	Phone Number	Business / Position	Years Acquainted

AUTHORIZATIONS & ACKNOWLEDGEMENTS

Please read the following statements carefully before signing this application. If you have any questions regarding these statements, please ask for clarification before proceeding.

1. Equal Employment Opportunity (EEO) Statement

The Municipality is an Equal Opportunity Employer. In accordance with the Idaho Human Rights Act (Idaho Code Title 67, Chapter 59) and federal law, we are dedicated to a policy of non-discrimination in employment. Job applicants are considered for all positions without regard to race, color, national origin, religion, sex (including pregnancy, childbirth, or related medical conditions), age (40 and older), or physical/mental disability.

2. Idaho Veteran's Preference Disclosure

Under Idaho Code Title 65, Chapter 5, public entities must provide preference to eligible veterans and certain spouses of veterans in regular, full-time municipal employment.

- To claim Veteran's Preference, you must complete the separate Veteran's Preference Form and provide a copy of your **DD Form 214** (Member-4 copy) or other official documentation showing dates of service and discharge status.
- Preference points will only be applied if the required documentation is submitted concurrently with this application.

3. At-Will Employment Acknowledgment

I understand and agree that, if hired, my employment relationship with the Municipality will be **"at-will."** This means that Idaho is an at-will state, and either I or the Municipality may terminate the employment relationship at any time, with or without cause, and with or without prior notice.

Note: *No supervisor, manager, or representative of the Municipality has the authority to enter into any agreement for employment for a specified period of time, or to make any guarantees or assurances contrary to the foregoing, unless explicitly authorized in writing by the City Council or Mayor.*

4. Background Check & Fair Credit Reporting Act (FCRA) Disclosure

I acknowledge that any conditional offer of employment is contingent upon the successful completion of a background screening.

- I hereby authorize the Municipality to conduct a comprehensive background check, which may include verification of my criminal history, driving record (MVR), education, and prior employment.

- If a third-party consumer reporting agency is used, I understand that I am entitled to separate disclosures and authorization forms under the federal Fair Credit Reporting Act (FCRA), as well as a summary of my rights before any adverse employment decision is finalized based on the report.

5. Reference and Information Release Authorization

I authorize the Municipality to thoroughly investigate all statements contained in this application, my resume, and any other submitted materials.

- I grant permission to my former employers, educational institutions, and listed references to disclose any and all employment records, performance evaluations, and professional conduct histories.

- In accordance with Idaho law, current or former employers who disclose objective, job-related performance information in good faith are immune from civil liability. I hereby release the Municipality, my former employers, and all listed references from any liability or damages resulting from the exchange of this information.

6. Idaho Polygraph Protection Act Notice

Pursuant to **Idaho Code § 44-903**, it is unlawful for any municipal employer to require an applicant or current employee to take a polygraph, lie detector, or similar examination as a condition of employment or continued employment. *(Note: This protection does not apply to applicants seeking employment with law enforcement agencies or certain correctional facilities).*

APPLICANT SIGNATURE AND ACKNOWLEDGMENT

By signing below, I certify that all information provided in this employment application is true, accurate, and complete to the best of my knowledge. I understand that any false statements, omissions, or misrepresentations made on this application or during the interview process may result in the immediate rejection of my application, or immediate termination if discovered after hire.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the City.

If I am offered employment I agree to submit to a medical examination and drug test, if required, before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the City and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the City the results of the examination, which results shall remain confidential and segregated from my personnel file.

I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, if required, and if I am hired a condition of my employment will be that I abide by the City's Drug and Alcohol Policy. I understand that acceptance of this form does not indicate there is a position open and does not obligate the City to hire. If hired, I agree to abide by all City work rules, policies and procedures. The City retains the right to revise its policies or procedures, in whole or in part, at any time.

Applicant Printed Name: _____ **Date:** _____

Applicant Signature: _____

Note: Feel free to include a resume, cover letter, or other supporting documents to this application.