

**TOWN OF APPLE VALLEY  
EMPLOYMENT APPLICATION  
1777 N. Meadow Lark Drive  
Apple Valley, UT 84737  
(435) 877-1190 FAX (435) 877-1192**

Lowest salary acceptable: \$ \_\_\_\_\_ per month.

Type of Employment desired:  Full time  Part time  Shift work  Temporary

**APPLICANT INFORMATION**

Name \_\_\_\_\_ SSN: \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number: Day \_\_\_\_\_ Evening \_\_\_\_\_ Mobil \_\_\_\_\_

Do you have any relatives working for the town of Apple Valley?  No  Yes,

If yes, please list: \_\_\_\_\_

Have you ever been employed by the town of Apple Valley?  No  Yes

If yes, year and dept. \_\_\_\_\_

If the position for which you are applying is hazardous in nature, includes but not limited to working with or around heavy equipment or hazardous materials, are you **18** years of age or older?

No  Yes

Have you ever been convicted of a felony?  No  Yes, Please attach explanation including dates, details and penalties for each occurrence, including dates of any probationary periods. Note: each conviction will be judged in relation to time, seriousness, circumstances, and relationship to position sought, and will not necessarily bar you from employment.

\_\_\_\_\_  
Applicant will be required to undergo drug testing as a condition of employment with the town.

**VETERAN'S PREFERENCES**

Are you a veteran?  No  Yes Do you claim Disabled Veteran Preference?  No  Yes

If you are claiming veteran or disabled veteran status, please provide a copy of your DD-214 showing dates of service with each application submitted.

The town of Apple Valley provides reasonable accommodations to the known disabilities of applicants in compliance with the Americans with Disabilities Act.

\_\_\_\_\_  
THE TOWN OF APPLE VALLEY IS AN EQUAL OPPORTUNITY EMPLOYER

Read this application carefully. Type or print clearly in ink. You must sign and date this application and include all information requested. If more space is needed, attach an addendum using the same application format. Resumes may be submitted as an attachment but will not be accepted in lieu of the Town application. Applications which include wording such as "see resume" will be rejected. Copies of college transcripts or other official documents are required when claiming college credit and must accompany your application. False statements, evidence of fraud or deceit in connection with this application will disqualify you from the selection process, and if discovered after employment, are grounds for discharge. This application and all attached documents are official records of the Town of Apple Valley and cannot be returned.

**CERTIFICATES:** List job related professional or trade license, certificate, or registration:

Type	State	Number
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Languages: list languages you speak read and write other than English: \_\_\_\_\_

Do you have valid Driver's License?  No  Yes State and Number \_\_\_\_\_

Do you have a valid C.D.L.?  No  Yes Class \_\_\_\_\_ Number \_\_\_\_\_

Type Speed \_\_\_\_\_ Net words/minute \_\_\_\_\_ Shorthand Speed \_\_\_\_\_ Words/ Minute \_\_\_\_\_

Have you certified your type and/or shorthand speeds with Job Service within the last 12 months?  No  Yes

**EDUCATION AND TRAINING**

Have you graduated from high school or received if no, circle highest grade completed:  
 A high school equivalency diploma (GED)  Yes  No      1 2 3 4 5 6 7 8 9 10 11 12

COLLEGE, BUSINESS, TRADE SCHOOL OR SPECIAL TRAINING	CREDITS COMPLETED		MAJOR	CERTIFICATE, DEGREE, OR YEARS ATTENDED
	SEMESTER HOURS	QUARTER HOURS		


**WHEN CLAIMING COLLEGE CREDIT, PLEASE ATTACH TRANSCRIPT**

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