



**EMPLOYMENT HISTORY**

*List below all the positions you have held in the past ten years. In addition, list any other experience which you think may qualify you for the position applied. Begin with your present or most recent employment. Explain what you did during lapses in employment. Incomplete applications may be a reason for disqualification.*

<b>Name of Employer</b>  Address _____  City _____ State _____ Zip Code _____	<b>Type of Business</b>  _____  Title of Position Held _____	<b>From (Date)</b>  _____  <b>To (Date)</b>  _____	<b>Salary or Wage Per Hour</b>  _____ Starting  _____ Ending	<b>Reason for Leaving</b>
---	--	--	--	---------------------------

Describe Duties:	Name and Title of Immediate Supervisor	May We Contact This Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO
------------------	--	---

<b>Name of Employer</b>  Address _____  City _____ State _____ Zip Code _____	<b>Type of Business</b>  _____  Title of Position Held _____	<b>From (Date)</b>  _____  <b>To (Date)</b>  _____	<b>Salary or Wage Per Hour</b>  _____ Starting  _____ Ending	<b>Reason for Leaving</b>
---	--	--	--	---------------------------

Describe Duties:	Name and Title of Immediate Supervisor	May We Contact This Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO
------------------	--	---

<b>Name of Employer</b>  Address _____  City _____ State _____ Zip Code _____	<b>Type of Business</b>  _____  Title of Position Held _____	<b>From (Date)</b>  _____  <b>To (Date)</b>  _____	<b>Salary or Wage Per Hour</b>  _____ Starting  _____ Ending	<b>Reason for Leaving</b>
---	--	--	--	---------------------------

Describe Duties:	Name and Title of Immediate Supervisor	May We Contact This Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO
------------------	--	---

Commercial Driver's License (CDL) <input type="checkbox"/> YES <input type="checkbox"/> NO	Valid Driver's License <input type="checkbox"/> YES <input type="checkbox"/> NO
--	---

<p align="center"><b>PROVIDE YOUR EMAIL ADDRESS BELOW (THE CITY USES THIS AS A PRIMARY MEANS OF COMMUNICATION)</b></p> _____	<b>How did you learn about this job opportunity?</b> <input type="checkbox"/> Internet <input type="checkbox"/> EEO/Affirmative Action Office <input type="checkbox"/> Newspaper <input type="checkbox"/> EmployRI Network <input type="checkbox"/> Walk-In <input type="checkbox"/> Family/Friends <input type="checkbox"/> Other _____
--	---

**THIS AFFIRMATION MUST BE COMPLETED**

I certify that my statements are true, complete, and correct and are made in good faith. I understand that any misstatement of fact and/or material omission will be considered as willful.

I certify that there are no material omissions, misrepresentations and falsifications of the above statements and answers to questions on both sides of this application. I understand that should an investigation disclose such material omissions, misrepresentations, and falsifications, my application may be rejected and, should I be employed, my service may be terminated.

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

**FOR HUMAN RESOURCES USE ONLY  
REASON(S) FOR DISQUALIFICATION:**

A  B  C  D  E  F  G  H  I  J

**CITY OF EAST PROVIDENCE  
VOLUNTARY SURVEY**

The following is an invitation to self-identify. Your participation is strictly voluntary, but extremely helpful. This form does not affect the status of your application. The data requested is used solely by the City of East Providence Equal Employment/Affirmative Action Office to evaluate our efforts in recruiting and maintaining a diverse workforce. Information collected will be kept confidential and refusal to provide it will not subject the applicant to any adverse treatment in accordance with EEO and ADA. Thank you for participating in this survey!

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Middle Initial:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Position Applied For:** \_\_\_\_\_ **Gender**    Male    Female

**Veteran Status:**    Veteran                       Post 9/11 Veteran                       Disabled Veteran

**Age 40 or over:**    Yes    No

---

**Please Check Below Any That Apply (*See below for race and ethnicity category definitions*):**

- |   |  |
|---|--|
| <input type="checkbox"/> <b>Hispanic or Latino</b>                        | <input type="checkbox"/> <b>Asian</b>                            |
| <input type="checkbox"/> <b>White</b>                                     | <input type="checkbox"/> <b>American Indian or Alaska Native</b> |
| <input type="checkbox"/> <b>Black or African American</b>                 | <input type="checkbox"/> <b>Two or More Races</b>                |
| <input type="checkbox"/> <b>Native Hawaiian or Other Pacific Islander</b> |  |

Race and ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. Definitions of the race and ethnicity categories are as follows:

**Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

**White (Not Hispanic or Latino)** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Black or African American (Not Hispanic or Latino)** - A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**Asian (Not Hispanic or Latino)** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**American Indian or Alaska Native (Not Hispanic or Latino)** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

**Two or More Races (Not Hispanic or Latino)** - All persons who identify with more than one of the above five races.

**The City of East Providence does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services.**

*Equal Employment Opportunity /Affirmative Action Employer*