

CITY OF BALTIC, SD

JOB APPLICATION

USE THE BACK OF THIS SHEET OR AN EXTRA SHEET FOR MORE SPACE.

NAME _____

ADDRESS _____

TELEPHONE (DAY) _____ **(EVENING)** _____

Position being applied for _____

Education. List post-secondary schools attended, courses of study and degrees/diplomas

List names and addresses of three personal references NOT related to you. Students list at least one teacher as a reference.

1) _____

2) _____

3) _____

List education and experience that qualifies you for this position. _____

Do you possess a valid South Dakota Drivers License? Circle one. **YES** **NO**

Are you willing to work occasional evenings or weekends? Circle one. **YES** **NO**

Are you presently working either full or part-time? Circle one. **YES** **NO**

Have you been employed before? Circle one. **YES** **NO**

- **If so please list your last Employers name and address.**

Do you give the City of Baltic permission to contact your last Employer? Circle one. **YES** **NO**

Explain why you want to work for the City of Baltic.

Return this application to Baltic City Hall, 130 St. Olaf Ave. PO Box 327, Baltic, SD 57003