

City of Hillsboro

Summer Employment Application

Name & address: _____

Phone: _____ Alternate Phone: _____ Date of Birth: _____

Department Preference: _____

Are you willing to work other departments? Yes _____ No _____

EDUCATION	NAME & ADDRESS OF SCHOOL	YEARS COMPLETED
ELEMENTARY SCHOOL		
HIGH SCHOOL		
COLLEGE		

Describe any specialized training, apprenticeships, skills and/or extra-curricular activities:

START WITH YOUR PRESENT OR LAST JOB. INCLUDE ANY JOB-RELATED MILITARY SERVICE ASSIGNMENTS AND VOLUNTEER ACTIVITIES. YOU MAY EXCLUDE ORGANIZATIONS WHICH INDICATE RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, DISABILITIES OR OTHER PROTECTED STATUS.

EMPLOYER	DATES EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS			
TELEPHONE NUMBER	HOURLY RATE/SALARY		
	STARTING	FINAL	
JOB TITLE			
REASON FOR LEAVING			

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	FROM	TO	
ADDRESS			
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