

CITY OF GILLETTE
INFORMATION TECHNOLOGY DEPARTMENT
PERSONAL HISTORY STATEMENT

Instructions to the applicant:

The information you provide in this personal history statement will be used in the investigation into your background to assist in determining your suitability for the position with the City of Gillette **Information Technology** Division. Please fill out the questionnaire completely and accurately. Please keep in mind that:

1. The completion of this form is mandatory for all applicants.
2. All statements are subject to verification.
3. Deliberate inaccuracies or incomplete statements may bar or remove you from employment consideration.
4. All time periods in your background must be accounted for.
5. All addresses must be complete; include City, State and Zip Code.
6. All phone numbers require an Area Code.
7. Proper completion of this document as requested will be evaluated and used as one basis for employment decisions.

It is to your advantage to respond openly. Any negative factor in your background will be evaluated in terms of the circumstances and facts surrounding its occurrence and its degree of relevance to the job. For example, being fired from a job or having an arrest record is not in itself grounds for disqualification. During the investigation, the investigator will inquire into the facts surrounding such an occurrence. An evaluation will then be made of the relevance of these facts to the requirements of the job.

Deliberate omissions or deliberate misstatements of required information are grounds for rejection. Failure to properly complete this document may also result in rejection of your application.

PLEASE PRINT IN INK – MUST BE HANDWRITTEN IN YOUR OWN HANDWRITING.

If a question does not apply to you, write N/A (not applicable) in the space provided for your answer. Do not leave any space blank. If you need more space to respond to a question, use additional pages and identify the additional information by question number.

PLEASE NOTE – This information is required due to the level of sensitive information you will have access to.

ACTIVITIES

Clubs, community activities, hobbies, sports, etc.:

Leadership positions (indicate positions/organizations/dates held):

Awards, commendations or items of special recognition:

Are there any incidents in your life not mentioned herein which may reflect upon your suitability to perform the duties which you may be called upon to perform? Yes_____ No_____

If yes, please explain:

EMPLOYMENT HISTORY

List your complete employment record starting with your last or present employer.

All employment must be listed. Please include both the month and year in the date column and complete address and phone number. Also, all periods of unemployment must be accounted for. If additional space is needed, a separate page should be attached.

DATES	EMPLOYER NAME, ADDRESS & PHONE NUMBER	POSITION HELD; SUPERVISOR'S NAME & TITLE	RATE OF PAY	REASON FOR LEAVING

Have you ever quit a job rather than get fired? Yes_____ No_____

Please explain in detail the circumstances surrounding your termination/request to leave. Please include dates, name, address and phone number of employer, supervisor's name and all of the facts. If you have been fired/requested to leave more than once, please list each incident separately (attach additional pages if necessary):

Specifically, what was the allegation(s) made against you by your employer?

MILITARY SERVICE

Have you ever been a member of any branch of the United States Military? Yes ____ No ____

Branch of Service: _____

Date of Enlistment: _____ Date of Discharge: _____
month/day/year month/day/year

Military Job Title(s): _____

Special Schools/Training:

Awards/Commendations (type and date awarded):

While in the military, were you ever convicted in a trial by court-martial? Yes ____ No ____

If yes, give date, place, law enforcing authority or type of court or court-martial, charge and action taken for each incident.

Charge: _____ Date: _____ Results: _____

Are you currently a member of a United States Reserve or National or State Guard Organization?
Yes ____ No ____

Branch of Service: _____ Grade: _____

Are you: Active: ____ Inactive ____ Standby ____

Organization/Station/Unit and Location: _____

FINANCIAL INFORMATION

This section will be used to evaluate the behavior exhibited by you in meeting your financial obligations from a risk perspective.

Have you ever filed for or declared bankruptcy? Yes _____ No _____

If yes, explain (include when, where, why):

Have any of your bills ever been turned over to a collection agency? Yes _____ No _____

If yes, explain (include when, firms involved, circumstance):

Have your wages or tax refunds ever been garnished? Yes _____ No _____

If yes, explain (include when, where, why):

Have you ever had court action taken against you for failing to pay child support?

Yes _____ No _____

Have you ever been delinquent on your financial obligations, income tax or other tax payments?

Yes _____ No _____

If yes, explain (include when, where, why):

Has credit ever been denied to you or canceled on you? Yes _____ No _____

If yes, explain: (include when, where, why):

Have you ever written a check that was returned for insufficient funds or because the account was closed? Yes _____ No _____

MISCELLANEOUS INFORMATION

Do you have any relative currently employed with the City of Gillette? Yes _____ No _____
If yes, give their name, position and the nature of relationship (i.e. parent, aunt, uncle, brother, etc.)

How have you prepared yourself to be an employee of the City of Gillette?

Why is becoming an employee with the City of Gillette important to you?

I hereby certify that there are not willful misrepresentations, omissions or falsifications in the foregoing statements and answers to questions.

I am fully aware that any such misrepresentations, omissions or falsifications will be grounds for immediate rejection of my applications, or if hired, termination of my employment.

Dated this _____ day of _____, 20 _____.

Applicant Signature