

Employment Experience

If you attach your resume, you still must complete the entire application. Start with current or most recent employment and account for all periods, including military and unemployment.

From: Mo./Yr.	To: Mo./Yr.	Firm Name & Telephone Number:	City/State:	Base Earnings: \$ _____ per
Job Title: _____ Name/Title of Supervisor: _____ Supv. Phone #: _____				
Work Performed: _____ _____ _____				
Reason for leaving: _____				

From: Mo./Yr.	To: Mo./Yr.	Firm Name & Telephone Number:	City/State:	Base Earnings: \$ _____ per
Job Title: _____ Name/Title of Supervisor: _____ Supv. Phone #: _____				
Work Performed: _____ _____ _____				
Reason for leaving: _____				

From: Mo./Yr.	To: Mo./Yr.	Firm Name & Telephone Number:	City/State:	Base Earnings: \$ _____ per
Job Title: _____ Name/Title of Supervisor: _____ Supv. Phone #: _____				
Work Performed: _____ _____ _____				
Reason for leaving: _____				

From: Mo./Yr.	To: Mo./Yr.	Firm Name & Telephone Number:	City/State:	Base Earnings: \$ _____ per
Job Title: _____ Name/Title of Supervisor: _____ Supv. Phone #: _____				
Work Performed: _____ _____ _____				
Reason for leaving: _____				

If additional space is needed, please attach an extra sheet.

May we contact firms or agencies listed? YES NO Indicate any that should not be contacted: _____

I certify that the information given in response to the above questions is true and correct and that I have not knowingly withheld or misrepresented any material fact herein or in my resume. Any false information given herein shall result in the immediate rejection of this application or shall be grounds for immediate dismissal if discovered after being hired. I understand that the City will thoroughly investigate any information given to them during the application and selection process. I authorize any former employer(s), law enforcement agency, educational institution or any person or organization to provide information about me and release all concerned from all liability in connection therewith.

I understand that my employment with the City is conditional upon being able to perform the essential functions of the job applied for, with or without reasonable accommodation, and to that end, I agree to submit to a post offer medical examination and such further medical examination as may be required. Failure to pass such examinations may result in the revocation of my employment offer.

I am a U.S. Citizen or I am lawfully authorized to work in the U.S. and will provide documentation as required by law if offered employment with the City of Portsmouth.

Applicant's Signature: _____ Date: _____

***If you attach your resume, you still must complete the entire application.
Thank you for considering employment with the City of Portsmouth***