



City of Newport, Rhode Island
APPLICATION FOR EMPLOYMENT

Department of Human Resources
 City Hall – 43 Broadway
 Newport, RI 02840-2792

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, disability, or any other legally protected status.

(PLEASE PRINT IN INK)

Position(s) applied for _____ Full Time Part Time
 Seasonal Temporary

Were you previously employed by the City? Yes No If yes, when? _____

If your application is considered favorably, on what date will you be available for work? _____

PERSONAL INFORMATION

Name _____ E-mail _____
LAST FIRST MIDDLE

Present Address _____ Telephone No. _____
NO. STREET APT. NO. CITY STATE ZIP

Are you a U.S. Citizen? Yes No If no, are you legally eligible for employment in the US? Yes No
(Proof of citizenship or immigration status will be required upon employment.)

Are you presently employed? Yes No If yes, may we contact your present employer? Yes No

Have you ever been convicted of a crime? Yes No *(for Police Officer applicants only)*

If so, please explain: _____
(Criminal convictions will not necessarily disqualify an applicant from employment, but will be considered in relation to specific job requirements.)

Do you possess a valid driver's license? Yes No If yes, which State/class? _____

Has your driver's license ever been suspended? Yes No If yes, explain _____

EDUCATIONAL RECORD

	High School	College/University	Graduate/Professional/Trade
School Name & Location			
Diploma/Degree			
Year Graduated			
Honors Received			
Describe Course of Study			

MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces? Yes No If so, what branch? _____

Are you a U.S. Veteran? Yes No *(please attach a copy of your DD-214)*

EMPLOYMENT HISTORY

List below present and past employment, beginning with your most recent

1. Name/Address of Employer	FROM		TO				Reason for Leaving	Name of Supervisor
	Mo	Yr	Mo	Yr				
	Position Held _____ Describe Duties:							
Tel.								
2. Name/Address of Employer	FROM		TO				Reason for Leaving	Name of Supervisor
	Mo	Yr	Mo	Yr				
	Position Held _____ Describe Duties:							
Tel.								
3. Name/Address of Employer	FROM		TO				Reason for Leaving	Name of Supervisor
	Mo	Yr	Mo	Yr				
	Position Held _____ Describe Duties:							
Tel.								
4. Name/Address of Employer	FROM		TO				Reason for Leaving	Name of Supervisor
	Mo	Yr	Mo	Yr				
	Position Held _____ Describe Duties:							
Tel.								

BUSINESS/WORK RELATED REFERENCES

Name and Occupation	Address/Company	Phone Number

APPLICANT'S STATEMENT

PLEASE READ THE FOLLOWING STATEMENT BEFORE SIGNING THIS APPLICATION

I certify that the information contained in this application contains no misrepresentation or falsification and is true and complete to the best of my knowledge and belief. I understand that any false statements knowingly made may be cause for disqualification in examination, removal from eligibility register and removal from public service if appointed.

Applicant Signature

Date

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

City of Newport, Rhode Island

Equal Employment Opportunity Form

Completion of this form is voluntary and will not affect your opportunity for employment, or the terms or conditions of your employment. This form will only be accessed by the Human Resources department and will be kept confidential. If you choose not to identify at this time, the federal government requires The City of Newport to determine this information by visual survey and/or other available information in order to complete EEO-4 reporting.

Sex: ___ Male ___ Female

Race/Ethnicity (please select one):

___ American Indian or Alaskan Native - A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment

___ Asian - 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

___ Black or African American - A person having origins in any of the Black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."

___ Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

___ White - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

___ Hispanic or Latino (All races) - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin.

___ Other Race not indicated above – specify _____

Veteran Status:	Yes	No
Disabled Veteran:	Yes	No
Disability Status:	Yes	No
Military Spouse:	Yes	No

Please identify where you learned about this employment opportunity with the City of Newport:

Word of Mouth	Internship
Email Announcement	Job Fair
Newspaper Advertisement	HR Office
Website	
Referral	

Please submit completed applications, your resume, and any other documents requested in the advertisement to hr@cityofnewport.com

If you need an accommodation, are having difficulty with the form, or have other questions, please reach out to hr@cityofnewport.com