APPLICATION FOR EMPLOYMENT AS CITY MANAGER

Name:_____ _____

Last *First* *Middle* *Social Security Number*

_____

Driver's License No. (State)

List below all other names or surnames you have used or been known by and describe when, how and why your name was changed (e.g., marriage, divorce, or change of name).

Last Name, First, Middle	Used from	Used to	Description of change
_____	*Year*_____	*Year* _____	_____
_____	*Year*_____	*Year* _____	_____
_____	*Year*_____	*Year* _____	_____

Telephone numbers and e-mail address at which you can be reached:

_____

Home *Office* *E-mail*

---

1. List every permanent and temporary residence at which you have lived in the past 10 years in reverse chronological order, starting with your current address:

CURRENT ADDRESS: From Mo/Yr _____

Address:_____

City:_____ County:_____

State:_____ Zip:_____ Country if not United States _____

►From Mo/Yr _____ To Mo/Yr _____

Address:_____

City:_____ County:_____

State:_____ Zip:_____ Country if not United States _____

►From Mo/Yr _____ To Mo/Yr _____

Address:_____

City:_____ County:_____

State:_____ Zip:_____ Country if not United States _____

2-A. List the names of all colleges and universities you have attended, their location (including the name of the campus if the school has more than one location), and the degree received. Indicate no degree if you did not receive a degree.

►College _____ City_____ State _____

Degree _____

►College _____ City_____ State _____

Degree _____

►College _____ City_____ State _____

Degree _____

►College _____ City_____ State _____

Degree _____

2-B. List any additional specialized training or certification you have received which has supplemented or enhanced your management skills.

_____
_____
_____
_____
_____
_____
_____

---

3. Have you ever been suspended, placed on scholastic or disciplinary probation, expelled, or requested to resign, or allowed to resign in lieu of discipline from any high school, college or university?

☐ Yes ☐ No

If yes, list the name of the institution, the date such action was taken, and a brief description of the underlying offense and action taken.

*Name of the institution*_____

Date of the action _____

*Description*_____
_____
_____
_____
_____

EMPLOYMENT

►CURRENT EMPLOYMENT

From Mo/Yr _____ To Present Position_____

Employer or firm _____

Supervisor or associate _____

Address _____

City _____ *State* _____ *Zip* _____

Supervisor
Contact Telephone _____

Supervisor
Contact E-mail _____

Current Compensation _____

If you are self-employed, provide a reference who can verify the nature and length of your employment or practice:

*Name*_____

*Address*_____

City _____ *State* _____ *Zip* _____

Contact Telephone _____ *Contact E-mail* _____

4. List every job/position you have held for the previous 15 years. List such employment in reverse chronological order prior to your current employment.

► From Mo/Yr _____ To Mo/Yr _____ Position _____

Employer or firm _____

Reason for leaving _____

Supervisor _____

*Address*_____

*City*_____ *State* _____ *Zip* _____

*Telephone*_____ *E-mail* _____

► From Mo/Yr _____ To Mo/Yr _____ Position _____

Employer or firm _____

Reason for leaving _____

Supervisor _____

*Address*_____

*City*_____ *State* _____ *Zip* _____

*Telephone*_____ *E-mail* _____

► From Mo/Yr _____ To Mo/Yr _____ Position _____

Employer or firm _____

Reason for leaving _____

Supervisor _____

*Address*_____

*City*_____ *State* _____ *Zip* _____

*Telephone*_____ *E-mail* _____

5. Have you ever been investigated, terminated, suspended, disciplined, or permitted to resign in lieu of termination from any job?

☐ Yes ☐ No

If yes, provide the following information about each occurrence:

Employer or firm _____

*Date of occurrence*_____

Briefly describe the nature of the occurrence which resulted in such action, the specific outcome from such occurrence, and your supervisor at the time of such occurrence:

_____
_____
_____
_____

6. Have you ever held a license for any business, trade or profession?

☐ Yes ☐ No

If yes, provide the following information about each license:

►*Type of license* _____

Current status of license _____

Issuing Authority _____

Address of Issuing Authority _____

►*Type of license* _____

Current status of license _____

Issuing Authority _____

Address of Issuing Authority _____

►*Type of license* _____

Current status of license _____

Issuing Authority _____

Address of Issuing Authority _____

---

7. A. Have you ever been denied a license for business, trade or profession?

☐ Yes ☐ No

B. Have you ever had a business, trade or professional license revoked or suspended?

☐ Yes ☐ No

If you answer yes to either of the above, please list the name of the regulatory agency, the regulatory agency address, agency action taken, and an explanation of the occurrence:

Name of regulatory agency _____

*Address*_____

City _____ *State* _____ *Zip* _____

Agency action _____ *Date* _____

Explanation _____

_____

_____

_____

---

8. Have you ever been suspended, censured, removed, or otherwise reprimanded or disqualified as a member of another profession?

☐ Yes ☐ No

If yes, please list the name of regulatory agency, regulatory agency address, agency action, and explanation of the occurrence.

Name of regulatory agency _____

*Address*_____

City _____ *State* _____ *Zip* _____

Agency action _____ *Date* _____

Explanation _____
_____
_____
_____

---

9. A. Has any surety on any bond on which you were the principal been required to pay any money on your behalf? ☐ Yes ☐ No

   B. Have you ever been refused a fidelity, surety or other type of bond? ☐ Yes ☐ No

   C. To your knowledge, have you ever been denied a security clearance? ☐ Yes ☐ No

   D. To your knowledge, has a security clearance previously granted to you ever been revoked? ☐ Yes ☐ No

---

10. Have you ever been named a party to any civil or administrative action or legal proceeding? ☐ Yes ☐ No

If yes, list the title of the action, the jurisdiction in which such action was taken, the date of action, and the outcome of such action. If you have been involved in more than one action, please provide the same information as listed below in an attachment.

Complete title of action _____

Court File number _____

Name and complete address of court involved:
Name of court _____
Address _____
*City*_____ *State* _____ *Zip* _____

Plaintiff's Name _____
*Address*_____
*City*_____ *State* _____ *Zip* _____
Plaintiff's attorney _____
Address _____
City _____ *State* _____ *Zip* _____

Defendant's Name _____
*Address*_____
*City*_____ *State* _____ *Zip* _____
Defendant's attorney _____
Address _____
City _____ *State* _____ *Zip* _____

Trial Date _____ *Date of final disposition* _____

*Disposition and brief explanation of the suit:*_____
_____
_____
_____
_____
_____

11-A. Have you ever been cited, arrested, charged, or convicted of any criminal offense? Criminal offense does not include minor misdemeanors nor traffic offenses other than operating a vehicle while impaired or similar state law or local ordinance.

☐ Yes ☐ No

If yes, list the date of the occurrence, the court in which you were convicted or otherwise charged, and the outcome of the offense.

Date of incident (or time period involved) _____

Title of complaint or indictment _____

Case number _____

Name and complete address of court involved:
Name of court _____
Address _____
*City*_____ *State* _____ *Zip* _____

Name and complete address of law enforcement agency involved:
Name of law enforcement agency _____
Address _____
*City*_____ *State* _____ *Zip* _____

Final Disposition _____

Brief description of incident _____
_____
_____
_____
_____
_____

11-B Have you ever hired or retained a criminal defense attorney or an attorney to represent you or advise you in a criminal matter?

☐ Yes ☐ No

If yes, please describe the circumstances under which the attorney was retained and the outcome of that investigation or proceeding.

_____
_____
_____
_____
_____
_____

CHARACTER REFERENCES

12. Provide the names and addresses of at least five (5) character references.

(a) Name_____

Address_____

City_____ State_____ Zip_____

Phone_____ Email_____

Occupation_____ Years Known_____

(b) Name_____

Address_____

City_____ State_____ Zip_____

Phone_____ Email_____

Occupation_____ Years Known_____

(c) Name_____

Address_____

City_____ State_____ Zip_____

Phone_____ Email_____

Occupation_____ Years Known_____

(d) Name_____

Address_____

City_____ State_____ Zip_____

Phone_____ Email_____

Occupation_____ Years Known_____

(e) Name_____

Address_____

City_____ State_____ Zip_____

Phone_____ Email_____

Occupation_____ Years Known_____

I hereby certify that all statements on this application are true and correct to the best of my knowledge and belief. I understand that the City of Montgomery, Ohio solicits this information so as to be informed of my previous record and character. I understand that my employment with the City of Montgomery depends upon the successful completion of a criminal background investigation and an investigation of the other information as provided herein. If employed, I understand that any falsification, misrepresentation or omission of facts within this application may be considered grounds for disqualification, release or immediate dismissal.

_____

Name Date