

## 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 Tir	me □ Part Time □				
		Seaso	nal □ Temporary □				
Were you previously emp	loyed by the City? Yes $\Box$	No □ If yes, when?					
If your application is considered favorably, on what date will you be available for work?							
PERSONAL INFORMATION							
Name		F-mail					
LAST	FIRST	MIDDLE					
Present Address	OTDEET	Telep	ohone No				
NO.	STREET	APT. NO.					
	CITY STA	TE ZIP					
Are you a U.S. Citizen? Yes $\square$ No $\square$ If no, are you legally eligible for employment in the US? Yes $\square$ No $\square$ (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 conv	victed of a crime? Yes □ I	No 🏻 (for Police Officer applica	ants only)				
If so, please explain:			ered in relation to specific job requirements.)				
(Criminal convictions will	not necessarily disqualify an applicant	from employment, but will be conside	ered 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							
	EDUCATION	ONAL 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 Are you a U.S. Veteran? Ye	I Forces? Yes □ No □ If so es □ No □ (please attach a	, what branch? copy of your DD-214)	Rev. 1/2025				

EMPLOYMENT HISTORY  List below present and past employment, beginning with your most recent								
	FROM		ТО			Reason fo		
Name/Address of Employer	Мо	Yr	Мо	Yr		<u> </u>		
	Position Held					Describe Duties:		
Tal								
Tel.	FROM TO				Reason fo	or Name of		
Name/Address of Employer						Leaving	Supervisor	
	Мо	Yr	Мо	Yr				
	Position Held Desc					Describ	e Duties:	
Tel.			1					
2 Name/Address of Employer	FR	MO	1	0		Reason fo Leaving		
3. Name/Address of Employer	Мо	Yr	Мо	Yr				
	Position Held Describe [						e Duties:	
	-							
	-							
Tel.	_		1		T			
4. Name/Address of Employer	FROM TO				Reason fo Leaving			
4. Name/Address of Employer	Мо	Yr	Мо	Yr				
	Posi	sition Held Desc				Describ	e Duties:	
	-							
Tel.								
BUSINESS/WORK RELATED REFERENCES  Name and Occupation Address/Company Phone Number							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					Di	ate		

## 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 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	Fema	ıle	
			Race/Ethnicity (ple	ease select one):
	and South Am			aving origins in any of the original peoples of North a), and who maintains tribal affiliation or community
subconti		, for examp		ginal peoples of the Far East, Southeast Asia, or the Indian , India, Japan, Korea, Malaysia, Pakistan, the Philippine
<u>Bl</u> as "Haiti	ack or African an" or "Negro'	<u>American</u> - ' can be use	A person having origed in addition to "Bla	gins in any of the Black racial groups of Africa. Terms such ck or African American."
	ative Hawaiian amoa, or othe			rson having origins in any of the original peoples of Hawaii,
<u>W</u>	<u>hite</u> - A perso	n having ori	gins in any of the or	iginal peoples of Europe, North Africa, or the Middle East.
	spanic or Latir anish culture o		<u>:)</u> - A person of Mexi	can, Puerto Rican, Cuban, Central or South American, or
Otl	her Race not i	ndicated abo	ove – specify	
Veteran	Status:	Yes	No	
Disabled	Veteran:	Yes	No	
Disability	Status:	Yes	No	
Military S	pouse:	Yes	No	
Please identify where you learned about this employment opportunity with the City of Newport:			Please submit completed applications, your resume, and any other documents requested in the advertisement to hr@cityofnewport.com	
Word	of Mouth		Internship	If you need an accommodation, are having difficulty with
Emai	Email Announcement		Job Fair	the form, or have other questions, please reach out to hr@cityofnewport.com
Newspaper Advertisement		HR Office		
Webs	site			

Referral