



Employment Application – Public Works Employee

Position: Public Works Employee

Note: This position has the potential for promotion to a supervisory role based on performance, experience, and certifications.

Applicant Information

Name: _____

Address: _____

City/State/ZIP: _____

Phone: _____

Email: _____

Preferred Contact Method: Phone / Email

Available Start Date: _____

Are you legally authorized to work in the United States? Yes / No

Are you at least 18 years of age? Yes / No

Education

High School: _____

Graduated? Yes / No

Additional training, trade schools, or certifications:

Professional Certifications (check all that apply)

Grade A Water Operator Certification Yes / No

Grade I Wastewater Operator Certification Yes / No

Grade II Wastewater Operator Certification Yes / No

Other relevant certifications:

Work Experience (Begin with most recent)

Employer: _____

Position: _____

Dates Employed: _____

Supervisor: _____

Phone: _____

Primary Responsibilities:

Employer: _____
Position: _____
Dates Employed: _____
Supervisor: _____
Primary Responsibilities: _____

Municipal/Public Works Experience

Please summarize your experience related to municipal operations, utilities, infrastructure maintenance, equipment operation, or public works duties.

Equipment & Machinery Experience

List equipment, vehicles, and machinery you are trained or certified to operate.

Leadership & Advancement

This position has the potential for promotion to a supervisory role.
Please summarize any leadership, supervisory, or mentoring experience.

References

Provide three professional references.

1. Name: _____ Relation: _____ Phone: _____
2. Name: _____ Relation: _____ Phone: _____
3. Name: _____ Relation: _____ Phone: _____

Application Access & Instructions

Applications may be picked up in person at Ellsworth City Hall or requested by email at cityofells@ellsworthiowa.org.

Questions can be directed to 515-836-4751.

Applicant Statement

I certify that the information provided in this application is true and complete to the best of my

knowledge. I understand that falsification or omission may disqualify me from employment and may be grounds for dismissal if discovered after hiring.

Signature: _____ Date: _____