



**CITY OF MEDFORD**  
**TRAFFIC SUPERVISOR APPLICATION**

DATE OF APPLICATION: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TEL. NO.: \_\_\_\_\_ D.O.B: \_\_\_\_\_ S.S. # \_\_\_\_\_

HAVE YOU EVER BEEN EMPLOYED BY THE CITY? YES \_\_\_ NO \_\_\_

IF YES, WHICH DEPARTMENT: \_\_\_\_\_ DATES: \_\_\_\_\_

ARE YOU EMPLOYED NOW? YES \_\_\_\_\_ NO \_\_\_\_\_

MAY WE CONTACT YOUR EMPLOYER? YES \_\_\_\_\_ NO \_\_\_\_\_

EMPLOYER \_\_\_\_\_ TEL. NO.: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

WHEN WOULD YOU BE AVAILABLE FOR WORK? \_\_\_\_\_

ARE YOU PRESENTLY ON LAY-OFF? YES \_\_\_\_\_ NO \_\_\_\_\_

ARE YOU A VETERAN OF THE U.S MILITARY? YES \_\_\_\_\_ NO \_\_\_\_\_

**EDUCATION**

**SCHOOL NAME**

**HIGH**

**COLLEGE**

**Years completed**

**9 10 11 12**

**1 2 3 4**

**DEGREE RECEIVED:** \_\_\_\_\_

**Response to the following is voluntary. Failure to provide the information requested will not adversely affect your application. (Circle one for each statement.)**

I am:      Male          Female

I am:      (2) White      (3) Black      (4) Hispanic      (5) Asian

(6) American Indian or Alaskan Native      (7) Cape Verdean

**I declare that all of the information I have provided on this application is true, and I understand that falsification of any information is subject to the penalties for perjury and may result in discharge. I authorize investigation of all statements contained in this application.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_