

LEO Sample Online Application Form

The following form represents what applicants will see when they apply online and will help them prepare for the process.

Main Menu	Application Status	My Account
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Accounts Payable Clerk - Application process steps:

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Job Application Agency-wide Questions Supplemental Questions Confirm Application Certify & Submit

Job Application » Profile

* Required Field

Contact Information

*First Name

Middle Initial

*Last Name

Primary Phone

Alternate Phone

*Email

*By which method would you prefer to be notified about application status, testing dates and examination results? (Note: if you select 'Email,' you may still continue to receive paper notices from certain employers, depending on their preferences.)
 ▼

Former Last Name, if Applicable (list only one; leave blank if none)

Month and Day of Birth
 ▼ / ▼

***Address 1**

123 City Drivw

Address 2

***City**

Lynchburg

***State**

Virginia

***Zip Code**

24504

Country

US

Other Personal Information

***Do you possess a valid Driver's License?**

Yes No

Driver's License State

Virginia

Driver's License Number

Driver's License Class

== Select ==

***Can you, after employment, submit proof of your legal right to work in the United States?**

Yes No

***What is your highest level of education?**

Bachelor's Degree

Objective

State your objective

Preferences

What is your minimum compensation requirement?

\$ per year \$ per hour

Are you willing to relocate?

Yes No Maybe

Enter any comments regarding relocation

What type of job are you looking for?

Regular Temporary Seasonal Internship

What types of work will you accept?

Full Time Part Time Per Diem

What shifts are you available to work?

Day Evening Night

Rotating Weekends On Call (as needed)

Education [Add Education](#)

Work Experience [Add Work Experience](#)

Certificates and Licenses [Add Certificates or Licenses](#)

Skills [Add Skills](#)

Office Skills [Edit](#)

Typing: 0

Data Entry: 0

Additional Information [Add Additional Information](#)

References [Add Reference](#)

Resume [Edit Resume](#)

Text Resume

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Agency-wide Questions

* Required Field

If you need more than **one hour** to complete this section click the **'Save Work in Progress'** button occasionally to save your work. All questions marked **'Required'** need to be answered in order to submit the application. Note: **DO NOT** use HTML tags in your answers.

The purpose of the following questions is to obtain additional job related information to evaluate you for the position you are applying for or to provide us with statistics needed to evaluate our recruitment program as well as to prepare statistical reports required by Federal, State and local agencies. Demographic information will not be used for making employment decisions and will not be kept with your application for employment.

*1. Are you a current employee or have you worked for the City of Lynchburg in the past?

Yes No

2. If you answered "yes" to question #1, please list the dates you were employed, department, job title and your name when employed (if different).

*3. Do you have a family member who works for the City or is a member of Lynchburg City Council?

Yes No

4. If you answered "yes" to question #3, please provide their names.

- *5. Have you ever been convicted of a Misdemeanor? (A conviction does not automatically eliminate you from employment consideration. The nature of the offense, when it occurred and the requirements of the position will be taken into consideration.)
 Yes No
- *6. Have you ever been convicted of a Felony? (A conviction does not automatically eliminate you from employment consideration. The nature of the offense, when it occurred and the requirements of the position will be taken into consideration.)
 Yes No
- *7. Are you currently attending High School or preparing for a GED?
 Yes No
8. If you answered "yes" to question #9, please provide the expected date of completion.
- *9. Please indicate any other names under which your employment or school records may be listed.
- *10. The following information will help us to learn of the most effective way of informing interested persons of the job opportunities with the City of Lynchburg. Please check ONE of the following as to how you learned of employment opportunities with the City.
 City Job List or City Website
 TV Channel 15
 Website (Name of Website)
 Newspaper Ad (Name of Newspaper)
 City Employee
 (Other referral source)
11. If you checked "Website", "Newspaper Ad" or "Other Referral Source" in question #12 please provide the name of the website, newspaper, or other referral source.
- *12. Gender
 Male
 Female
- *13. Are you disabled?
 Yes No
- *14. To comply with applicable Labor Laws, please check appropriate age range:
 Under 16
 16 - 17
 18 - 21
 21 or over
- *15. To comply with Virginia State Codes regarding Veteran Status, please check the appropriate box:
 Veteran
 Disabled Veteran
 Not a Veteran
- *16. Racial or ethnic group with which you identify: (Check only one)
 White (Not of Hispanic origin)-All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East
 Black (Not of Hispanic origin)-All persons having origins in any of the Black racial groups of Africa
 Hispanic-All persons of Mexico, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
 Asian or Pacific Islanders-All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands.
 American Indian or Alaskan Native

*17. I hereby certify that the statements made by me in this application are true and complete to the best of my knowledge. I understand that any willful misstatements or material omissions in this application will be sufficient cause to disqualify me from employment consideration with the City of Lynchburg. If such misstatements or omissions are found after employment, it may be considered grounds for dismissal. I understand that this completed application and any materials submitted with it are the property of Lynchburg City Government and will not be returned. In the case of a panel interview, which may consist of non-City employees, I authorize my application to be viewed by members of the panel. I also understand that any offer of employment is contingent upon my ability to produce documentation as required by the Department of Homeland Security documenting eligibility for employment without sponsorship. I authorize the City of Lynchburg to conduct a thorough background investigation. I authorize my former employers and any other persons or organizations to provide any information they have about me, and I release all concerned from any liability in connection therewith. If employment is offered, I understand that my employment may be contingent upon successfully passing examinations which may include physical exams and/or drug and alcohol screening., given at the City's expense, and an acceptable criminal, DMV, and/or credit history check, if required for the position for which I applied.

- Agree
- Disagree

Save Work in Progress Save & Proceed

* Required Field

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Certify & Submit



By clicking on the 'Accept' button, I hereby certify that every statement I have made in this application is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work.

I understand that I will have to produce documentation verifying identity and employment eligibility in the U.S. If this position requires possession of a valid driver's license, I give the City of Lynchburg permission to obtain my driving record from the Virginia Department of Motor Vehicles. I understand it will be my responsibility to provide any out of state driving

records.

I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of the City of Lynchburg and will not be returned. I understand the City of Lynchburg may contact current and prior employers and other references. I understand that I must notify the Human Resources Department of any changes in my name, address, or phone number.

Accept Decline