

APPLICATION FOR EMPLOYMENT

"The City is an Equal Opportunity Employer"

Please Read The Following Before Filling Out This Application

The City is an equal opportunity employer and does not discriminate in recruitment, hiring, training, promotion or other employment practices for reasons of race, color, religious creed, national origin, sex or on the basis of age. The City also does not discriminate against veterans or disabled persons. No question in this application is intended to secure information to be used in a discriminatory manner. Your replies to the questions in this application will be held in the strictest confidence and in accordance with the Texas Open Records Act.

(Please Print)

PERSONAL INFORMATION

Name _____
first middle last

Present Address _____
street city state zip

Home Phone _____ Social Security No. _____

For what position are you applying? _____ Date available? _____

Are you a citizen of the United States? Yes No

If not, do you possess a valid alien registration card? Yes No Alien Registration No. _____

Are you 18 years of age or older? Yes No If not, state your age: _____

Have you ever been convicted of a felony? Yes No If yes, please explain: _____

(Conviction of a crime is not an automatic bar to employment. The City will consider the nature of the offense, the date, and the relationship between the offense and the position applied for.)

Would you be willing to take a physical examination at the City's expense if offered the job? Yes No

Have you ever been previously employed with the City? Yes No If yes, when? _____

How were you referred to us? Walk-in Advertisement Friend Other _____

EMPLOYMENT EXPERIENCE

Please complete your work experience starting with your present or last employer. Use additional sheets as necessary.

| | | | | |
|----------------------------------|----------------|--------|-------------------|-----|
| Employment Dates: | Company Name | | Phone | |
| From: | Address | City | State | Zip |
| To: | Your Job Title | Salary | Supervisor's Name | |
| Job Duties and Responsibilities: | | | | |
| Reason(s) for Leaving: | | | | |

| | | | | |
|----------------------------------|----------------|--------|-------------------|-----|
| Employment Dates: | Company Name | | Phone | |
| From: | Address | City | State | Zip |
| To: | Your Job Title | Salary | Supervisor's Name | |
| Job Duties and Responsibilities: | | | | |
| Reason(s) for Leaving: | | | | |

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|----------------------------------|----------------|--------|-------------------|-----|
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| Reason(s) for Leaving: | | | | |

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|----------------------------------|----------------|--------|-------------------|-----|
| Employment Dates: | Company Name | | Phone | |
| From: | Address | City | State | Zip |
| To: | Your Job Title | Salary | Supervisor's Name | |
| Job Duties and Responsibilities: | | | | |
| Reason(s) for Leaving: | | | | |

Are you presently employed? Yes No

If yes, may we contact your present employer? Yes No

If no, please give the reason: _____

MILITARY TRAINING

| | | |
|--|------|----|
| Branch of Service: | From | To |
| Military Duties and Training Received: | | |

EDUCATION

| | Name & Location | From | To | Circle Year Completed | Diploma |
|-------------------------------|-----------------|------|----|-----------------------|---------|
| Middle School or Jr. High | | | | 5 6 7 8 | |
| High School | | | | 9 10 11 12 | |
| College | | | | 1 2 3 4 5 6 | |
| Vocational or Business School | | | | 1 2 3 4 5 6 | |

List any current licenses, certifications or registrations you may have: _____

List any experiences, skills, training, or qualifications which you feel would be especially helpful in the job for which you are applying: _____

PERSONAL REFERENCES

| | |
|---------|------------|
| Name | Phone |
| Address | Occupation |

| | |
|---------|------------|
| Name | Phone |
| Address | Occupation |

| | |
|---------|------------|
| Name | Phone |
| Address | Occupation |

List any family members or relatives you have working for the City: _____

Are you a relative or kin to any member of the City Council/Commission? Yes No

If yes, who? _____

DRIVING RECORD

Please Fill Out This Section If The Job For Which You Are Applying May Require Driving City Vehicles or Equipment

Driver's License No. _____ State _____ Class/Type _____

Have you had any traffic accidents in the past 3 years? Yes No If yes, please list below:

| Date of Accident | Nature of Accident (head-on, rear-end, etc.) | Injuries? | Fatalities? |
|------------------|---|--|--|
| _____ | _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ | _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ | _____ | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

List any traffic violations you have been convicted of in the past 3 years other than parking violations:

| Location (city, state): | Date (mo./yr.): | Charge/Violation: |
|-------------------------|-----------------|-------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Have you ever had your driver's license suspended or revoked? Yes No If yes, explain below:

List any motor vehicles or motorized equipment you have driven: _____

Please Read and Sign This Agreement Before Submitting This Application

In submitting this application, I understand and agree that the statements set forth in my application are true and that any misrepresentation or omission of fact herein may result in the rejection of my application or my dismissal if hired. I also understand that my employment is conditioned upon successful completion of a physical examination and/or any other test or exam the City may require at the City's expense. I also authorize the City to make a thorough investigation of my past employment, military service, educational background, personal references, driving record, criminal record, and any other statement contained in this application as may be necessary in arriving at an employment decision and release from liability all persons, companies, corporations or agencies supplying such information. Furthermore, I understand and agree that this employment application, by itself or together with other City documents or policies, does not create a contract of employment. I also understand that I may voluntarily leave or be terminated at any time, with or without cause.

Signature of Applicant

Date