



**APPLICATION FOR EMPLOYMENT
CITY OF ELECTRA
101 N MAIN STREET
ELECTRA, TEXAS 76360**

In accordance with Federal law and the U.S. Department of Agriculture's policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write to: USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 14th and Independence Ave. SW, Washington, DC 20250-9410 or call 202-720-5964. USDA is an equal opportunity provider and employer.

Date: _____

Position Applying for: _____

PERSONAL DATA

Last Name		First	Middle	Mobile Phone
				()
Street Address				Home Phone
				()
City	State	Zip	How Long at present address?	
Driver's License Number	State	Class	Expiration Date	

Can you verify your legal rights to work in the United States by providing a birth certificate, proof of U.S. Citizenship, or by some other means? (Proof of citizenship or immigration status will be required upon employment.)

Yes No

If employed and you are under 18, can you furnish a work permit?

Yes No

Do you have adequate means of transportation to get to work on time each day and when called in on short notice?

Yes No

List any relatives currently working for the City of Electra:

Name	Department	Relationship
_____	_____	_____
_____	_____	_____

Have you been convicted of any criminal offense other than traffic violations? Yes No

If yes, give dates and detail of each conviction. (A conviction record is not an automatic ban to employment. The nature of the crime will be considered in relation to the position for which you are applying):

Were you previously employed by this organization? Yes No

If yes, list dates and department(s): _____

Date you can begin work:

Will you work overtime whenever scheduled or requested?

Yes

No

Can you work weekends whenever scheduled or requested?

Yes

No

Would you accept part-time work?

Yes

No

Would you accept temporary work?

Yes

No

Special skills you possess (Electrical, Mechanical, Clerical or Technical):

EDUCATION AND TRAINING

Have you served in the military? Yes ___ No ___

If yes, state the type of military discharge received. (A less than honorable discharge is not an automatic ban to employment. The circumstances of the discharge will be considered in relation to the position for which you are applying):

EDUCATION	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	NO. YEARS COMPLETED	DID YOU GRADUATE?
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade or Business				<input type="checkbox"/> Yes <input type="checkbox"/> No
College				<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No

Describe any special qualifications, skills, licenses, certificates, or other relevant training: _____

EMPLOYMENT HISTORY

In the space provided below give your employment history, beginning with your PRESENT or most recent employer. List all positions held, including military, part-time, summer and volunteer work. If additional space is required, please attach additional sheets using the same format.

<p>EMPLOYER: _____</p> <p>ADDRESS: _____</p> <p>_____</p> <p>TELEPHONE NO.: _____</p> <p>_____</p> <p>SUPERVISOR: _____</p> <p>MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>DATES EMPLOYED START: _____</p> <p>SEPARATION: _____</p> <p>HOURLY RATE/SALARY STARTING: _____</p> <p>FINAL: _____</p> <p>REASON FOR LEAVING: _____</p> <p>_____</p>	<p>JOB TITLE: _____</p> <p>DUTIES PERFORMED: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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PLEASE READ THE FOLLOWING INFORMATION CAREFULLY, THEN SIGN AND DATE BELOW.

FALSIFICATION OF INFORMATION: I understand that my eligibility will be based on the information contained on this application. I certify that all statements made on this application are true and correct. I understand that any false statement made by me on this application could cause me to be ineligible for employment or terminated from employment. Further, I understand that I am required to abide by all rules and regulations of the employer.

VERIFICATION OF INFORMATION: I authorize the City of Electra to investigate and verify the facts claimed by me on this application. I authorize my former employers to provide any information requested by the City of Electra. I further authorize the individuals listed as personal references to release any personal information that may pertain to my work habits or work performance.

EMPLOYEE HANDBOOK: I understand and agree that any employee handbook, which I may receive, will not constitute an employment contract, but will be merely a gratuitous statement of City's current policies.

EMPLOYMENT AT WILL: I understand that nothing in this Application, or in any prior or subsequent written or oral statement, creates a contract of employment or any rights in the nature of a contract. I agree and understand that if I am hired by the City, my employment will be at will, for an indefinite period of time and may be terminated at any time, with or without cause or notice, at the option of the City or myself. I understand that I have the right to end my employment at any time and that the City retains that same right.

DRUG – FREE WORK ENVIRONMENT: The City of Electra is committed to providing a safe, efficient, drug-free work environment for all employees. In keeping with this commitment, finalists for all job openings may be required to provide body fluids (blood or urine) to determine the use of alcohol, illegal or controlled substances in the work place. I understand that if I am employed with City of Electra the City may require that I submit to a drug or alcohol screen if I apply for promotion, if I am involved in an on-the-job accident, or if the City has a reasonable suspicion that I am under the influence of drugs or alcohol, and I hereby authorize the release of the results of any physical examinations or drug tests required herein to City of Electra. I further understand that the City may inspect all lockers and any bags (including purses or briefcases) or parcels brought into or taken out of City buildings, and that refusal to submit to a urinalysis, blood test or search, when requested to do so, may result in the termination of my employment.

AN EQUAL OPPORTUNITY EMPLOYER: The City of Electra considers all applicants for employment without regard to race, color, religion, ethnic affiliation, gender, national origin, age, disability, or veteran status, or any other protected status or classification in accordance with state and federal laws. The City of Electra also provides reasonable accommodations to qualified individuals with known disabilities, in accordance with the Americans with Disabilities Act.

Applicant Signature

Date