EMPLOYMENT APPLICATION

Application Information

Full name: _____ Date: _____

Last *First* *M.I.*

Address: _____ Phone: _____

Street address *Apt/Unit #*

_____ Email: _____

City *State* *Zip Code*

Date Available: _____ S.S. no: _____ Date of birth: _____

Position applied for: _____

Are you a citizen of the United States? Yes ☐ No ☐

If no, are you authorized to work in the U.S.? Yes ☐ No ☐

Have you ever worked for this company? Yes ☐ No ☐ If yes, when? _____

Do you hold a valid Texas driver's license? Yes ☐ No ☐

Education

High school: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes ☐ No ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes ☐ No ☐ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes ☐ No ☐ Degree: _____

References

Please list three professional references.

Full name:		Relationship:	
Company:		Phone:	
Address:		Email:	

Full name:		Relationship:	
Company:		Phone:	
Address:		Email:	

Full name:		Relationship:	
Company:		Phone:	
Address:		Email:	

Previous Employment

Company:		Phone:			
Address:		Supervisor:			
Job title:		From:		To:	
Responsibilities:					
May we contact your previous supervisor for a reference?		Yes ☐	No ☐		

Company:		Phone:			
Address:		Supervisor:			
Job title:		From:		To:	
Responsibilities:					
May we contact your previous supervisor for a reference?		Yes ☐	No ☐		

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job title: _____ From: _____ To: _____

Responsibilities: _____

May we contact your previous supervisor for a reference? Yes ☐ No ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job title: _____ From: _____ To: _____

Responsibilities: _____

May we contact your previous supervisor for a reference? Yes ☐ No ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job title: _____ From: _____ To: _____

Responsibilities: _____

May we contact your previous supervisor for a reference? Yes ☐ No ☐

Termination or Dismissal

Have you ever been terminated or otherwise involuntarily dismissed from any previous employment?

Yes ☐ No ☐

If yes, explain: _____

Record of Conviction

Have you ever pleaded no contest, pleaded guilty, received deferred adjudication or been convicted of a crime other than a minor traffic offense?

Yes ☐ No ☐

If yes, explain: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at discharge: _____ Type of discharge: _____

If other than honorable, explain: _____

Applicant's Acknowledgement and Signature

I understand this application for employment is good for 30 days only. If I am not selected for employment within 30 days, I will have to submit a new application to be considered for employment.

I understand that in making this application for employment a background check may be prepared whereby information is obtained through personal interviews with my neighbors, friends, or other acquaintances. Such an inquiry would include information as to character, general reputation, personal characteristics and mode of living.

I authorize you to communicate with the persons listed as references, former employers, and any others with whom you desire to check. I agree to hold such persons harmless with respect to any information they may give about me.

I authorize all previous employers to provide copies of or allow inspection of my personnel files at the request of the City of Floydada's representative conducting the background check.

I understand that completion of this application does not guarantee that I have been selected for employment by the City of Floydada. I understand that all job offers may be conditional until a satisfactory completion of all background checks, criminal history checks, drug screen, and physical exam. I hereby consent to all of these tests and checks.

I understand that all employees of the City of Floydada are employed at the will of the City for an indefinite period and are subject to termination at any time, for any reason, with or without cause or notice. I understand that I may terminate my employment at any time and for any reason. I understand that if I do not provide reasonable notice to terminate my employment with the City, I will not be eligible for re-hire.

I understand that any misrepresentations, deception, omission, or false statement made in this application may result in my not being considered for employment, and if not discovered by the City until after my becoming employed, is grounds for, and may result in, my immediate termination.

By signing below, I certify that I have read, understood, and agree to the conditions outlined in this applicant's acknowledgement and that every piece of information that I have provided on this document is true and correct to the best of my knowledge. I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably.

Signature: _____ Date: _____