



Instructions for filling out Employment Application:

1. Applications are accepted only for positions available at this time.
 2. Fill out entire application and attach all pertinent information.
 3. Return completed application to Human Resource Office.
 4. If your application is selected for an interview, we will call you.
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Please submit the following information with your application if applicable:

1. Copy of your résumé
2. Copy of your diploma or GED
3. Copies of recommendation letter(s)
4. Copies of credential(s)
5. Copies of certificates received from school/university
6. Copy of Driver's License

Identify below person(s) to be notified in case of emergency:

Name	Address	Phone
_____	_____	_____
_____	_____	_____

Have you ever been convicted of a felony, been placed on probation, or released from prison within the last seven years? ____ Yes ____ No

If yes, describe in full, including the dates(s) _____

Note: A criminal record does not constitute an absolute bar to employment. Factors such as age at the time of the offense, rehabilitation efforts, recency and seriousness of the crime will be taken into account.

Have you been bonded? ____ Yes ____ No

If so, why? _____

Give name, address and phone number of three (3) references NOT RELATED TO YOU (Not former employers or relatives) who have personal knowledge of your character, experience, and ability.

Name	Mailing address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Licenses: List all licenses you hold (Drivers, Electricians, etc)

Type	Issuing Agency	License No.	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Note: Driver's License records and other licenses will be investigated where essential and/or related.

EMPLOYMENT EXPERIENCE

List below each job held. Start with your present or last job. Include military service, paid or unpaid, full or part time, summer job, etc.

Note: previous employers will be contacted to verify your employment record.

1. Employer: _____ Start Date _____ End Date _____

Address: _____ Phone: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Responsibilities: _____

Supervisor _____ Reason for leaving: _____

2. Employer: _____ Start Date _____ End Date _____

Address: _____ Phone: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Responsibilities: _____

Supervisor _____ Reason for leaving: _____

3. Employer: _____ Start Date _____ End Date _____

Address: _____ Phone: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Responsibilities: _____

Supervisor _____ Reason for leaving: _____

4. Employer: _____ Start Date _____ End Date _____

Address: _____ Phone: _____

Job Title: _____ Starting Salary: _____ Ending Salary: _____

Responsibilities: _____

Supervisor _____ Reason for leaving: _____

Summarize Special Skills and Qualifications Acquired from Employment or other Experience:

EDUCATION:

	Elementary	High School	College/University	Graduate/Professional
School Name				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/ Degree Course of Study				
Special Training Skills, Apprenticeship				

Applicant Please Read Carefully

Certification

I hereby certify that answers given herein are true and complete to the best of my knowledge and agree that if employed, and misrepresentation, falsification or omission of facts thereon shall justify my dismissal.

I hereby authorize THE CITY OF ALAMO to fully investigate my record and work qualifications either before or after my employment by the City of Alamo and to facilitate such investigation, I also hereby authorize any persons, office agency or source, having information and knowledge about my personal, employment, or financial history and other related matters as may be necessary in arriving at an employment decision to furnish and release such information to the City of Alamo. I hereby release employers, schools, agencies or persons for all liability in responding to inquiries in connection with my application.

In submitting this application, I understand that it becomes the property of the City of Alamo and will not be returned.

Signature of Applicant

Date

Applicant, please note: All applications will be maintained in an active file for three (3) months and then discarded unless applicant contacts the Personnel Office.

Name _____ Date _____
Last First Middle Maiden

This information is used for statistical reporting to various regulatory agencies. The information will be detached from your application and will in no way be used in consideration of your application for employment.

Position applying for: _____

Race/Sex:

- Caucasian Male
- Caucasian Female
- Black Male
- Black Female
- Spanish Surname Male
- Spanish Surname Female
- American Indian Male
- American Indian Female
- Asian American Male
- Asian American Female
- "Other" Male
- "Other" Female

If "Other", please specify _____

U.S. Citizen Yes No

What led you to apply with the City?

- Stopped in to check on available jobs.
- Referred by a City Employee.
- Referred by an employment agency.
- Responding to an advertised vacancy.
- Referred by T.E.C.
- Other(please list) _____

Have you previously applied with the City? Yes No

If yes, when? _____ For what position? _____
Month, Year

Have you previously worked for the City? Yes No

If yes, when? _____ For what Department/position? _____
Month, Year

Under what other names have you been employed? _____

**SUPPLEMENTAL FORM
APPLICATION FOR EMPLOYMENT**

**AUTHORIZATION FOR RELEASE OF PERSONEL INFORMATION AND
AGREEMENT OF ASSISGNMENT**

The intent of this authorization is to get my consent for full and complete disclosure of the records of educational institution; employment and pre-employment records, including driver's license and criminal background reports, authorize consent for the City of Alamo to conduct pre-employment drug screening and alcohol testing, and efficiency ratings.

I understand that any information obtained by the personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the City of Alamo. I also certify that the persons who may furnish such information concerning me shall not be held legally accountable for giving this information in any way; and I do hereby release said persons from any and all liabilities which may be incurred as a result of furnishing such information.

I further agree that I may be assigned to any duty assignments upon initial employment or reinstatement or maybe transferred as the needs of the department may require while employed with the City of Alamo. I also fully understand the at will conditions of this employment and will be employed on a _____ Capacity as clearly noted (fulltime, Part-Time, temporary, etc.) and/or advertised.

A photocopy of this release form will be valid as an original thereof, even though the photocopy does not contain an original writing of my signature.

Signature

Social Security Number

Address

Driver's License Number

Witness

Telephone (including area code)