

City of Smithville Application for Employment

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

(Please Print)

Position(s) applied for:	Date of application:
How did you hear about the position?	

Last Name:	Middle Name:	First Name:	
Address:		State:	Zip:
D.O.B	Telephone Number(s)		
Email Address:			

Best time to contact you at home: _____ AM PM

Have you ever filed an application with us before? YES NO If yes, when? _____

Have you ever been employed with us before? YES NO If yes, when? _____

Do you have any friends or relatives other than a spouse work here? YES NO

Are you currently employed? YES NO

If yes, may we contact present employer? YES NO

Are you available to work: Full Time Part Time Temporary (indicate days and times below)

Date available for work: ____/____/____ Desired Salary Range: \$_____

Are you currently on "lay-off" status and subject to recall? YES NO

Are you willing to travel if a job requires it? YES NO

Do you have a current Texas Drivers License? YES NO

If you are under 18 years of age:

Are you able to provide required proof of your eligibility to work? YES NO

EDUCATION

	Name & Address of School	Course of Study	Number of Years Completed	Diploma/Degree
Elementary School				
High School				
College				
Other				

EMPLOYMENT EXPERIENCE

Start with your present/last job. Include any job-related military service assignments and volunteer activities.

Employer:	Address:	Dates Employed:
		From: To:
Supervisor:	Contact Phone Number:	Salary/Hourly Rate:
Job Title & Work/Duties Performed:		
Reason for Leaving:		
Employer:	Address:	Dates Employed:
		From: To:
Supervisor:	Contact Phone Number:	Salary/Hourly Rate:
Job Title & Work/Duties Performed:		
Reason for Leaving:		

Employer:	Address:	Dates Employed: From: _____ To: _____
Supervisor:	Contact Phone Number:	Salary/Hourly Rate:
Job Title & Work/Duties Performed:		
Reason for Leaving:		

If you need additional space, please continue on a separate sheet of paper.

Describe and summarize any specialized training, apprenticeship, job related skills or extra curricular activities you would like to be considered for your application:

Specialized Skills, please check if you have experience in:

PC/MAC

Microsoft Office

Outlook or Other Email Program/Accounts. Please Specify: _____

Typing _____

Heavy Equipment or Machinery, please list: _____

Other: Please Specify _____

State any additional information you feel may be helpful to us in considering your application:

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REFERENCES

Reference #1:

Name:	Address:	Phone #:
Current Job/Position:	Company:	Email Address:

Reference #2:

Name:	Address:	Phone #:
Current Job/Position:	Company:	Email Address:

Reference #3:

Name:	Address:	Phone #:
Current Job/Position:	Company:	Email Address:

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Applicant's Signature

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview YES NO

Remarks:

Employed YES NO

Date of Employment _____

Job Title _____ Hourly Rate _____ Department _____