

City of Pottsboro
APPLICATION FOR EMPLOYMENT
An Equal Opportunity Employer

If you need assistance in completing the employment application, please direct your inquiries to the person named as contact. Furthermore the City of Pottsboro conducts pre-employment interviews in the application process. If you believe you will require reasonable accommodation (e.g., interpreter, TDD, scheduling adjustments) in the application process, please inform the person as contact in writing when you submit your application. This application must be completely filled out to be considered for a position with the City of Pottsboro. Failure to completely answer all questions on the application may disqualify your application for employment consideration.

(Last Name)	(First)	(Middle)
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(Address)

(Mailing Address)

(City)	(State)	(Zip Code)	(Social Security #)
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Phone Numbers: Home:() _____ Work:() _____

Position(s) Applied For: _____

When would you be available to start work? _____

Check each type of work you will accept:

Full Time ___ Part Time ___ Regular ___ Temporary ___

Have you filed an application here before? ___ (Date) _____

Have you ever been employed here before? ___ (Date) _____

Are you or your spouse related to any officer or employee of this employer? Yes ___ No ___.

Minimum acceptable salary: \$ _____ per Hr ___ Wk ___ Mn ___ Yr ___.

EDUCATION AND TRAINING: Documentation of your last completed educational attainment will be required to be considered for a position with the City of Pottsville. Applicant must provide copies of diploma, transcript, etc.

Name & Location of School Attended No. Yrs. Attend Grade Average Major Field Degree Rec'd

Attach separate sheet of paper, if necessary.

SKILLS: The following space is provided for other information concerning special training and skills.

Keyboard/Typing _____ wpm Computer software:
 Copier _____ Fax _____ D-base _____ Lotus _____ Windows _____
 10-key Calculator _____ Word Perfect _____
 IBM Compatible _____ Other _____
 Computer _____

EMPLOYMENT EXPERIENCE: List each position held. Start with your present or most recent assignment and work backward. If you have had more than 4 previous positions, please describe your assignments on duplicates of this page. Include any military history in this section. May inquiry be made of your present & past employers? _____

Company _____ Phone # _____
 Address _____ Supervisor's Name _____
 City, State, ZIP _____
 Job Title _____ Starting Date _____
 Reason for leaving _____ Ending Date _____
 Duties _____ Salary _____ Per _____

Company _____ Phone # _____
 Address _____ Supervisor's Name _____
 City, State, ZIP _____
 Job Title _____ Starting Date _____
 Reason for leaving _____ Ending Date _____
 Duties _____ Salary _____ Per _____

Company _____ Phone # _____
Address _____ Supervisor's Name _____
City, State, ZIP _____
Job Title _____ Starting Date _____
Reason for leaving _____ Ending Date _____
Duties _____ Salary _____ Per _____

Company _____ Phone # _____
Address _____ Supervisor's Name _____
City, State, ZIP _____
Job Title _____ Starting Date _____
Reason for leaving _____ Ending Date _____
Duties _____ Salary _____ Per _____

ADDITIONAL INFORMATION: By law, you must be authorized to work in the United States in order to be employed by this employer. If you are one of the following, please check:

* A Citizen or national of the United States: _____

* An alien lawfully admitted for permanent residence: _____

* An alien authorized by the Immigration and Naturalization Service to work indefinitely in the USA: _____

Have you ever been convicted of a felony or other crime or been the subject of deferred adjudication: _____ If yes, please explain: _____

If the position that you are applying for requires motor vehicle operation, do you have a current driver's license?

Yes _____ No _____ State/License# _____

Type of License: Oper _____ Comm. _____ Chauffeur _____

REFERENCES: List three people not related to you who are qualified to describe your capabilities for the position you seek. Be sure to include telephone numbers.

Name	Phone #
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Address	Relationship
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Name	Phone #
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Address	Relationship
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Name	Phone #
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Address	Relationship
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I certify that the statements and information contained herein are true, complete, and correct to the best of my knowledge, and I authorize any former employer to release to this employer or its authorized representative any and all employment records and other information it may have about my employment. I understand that the information will be used for the purpose of evaluating my application for employment and that I am responsible for providing legal documents verifying my identity and eligibility for employment. In addition, I understand that, if selected for an interview, true copies of all degrees, certificates, or licenses listed on this application will be required before an employment decision can be made. A photocopy of this authorization shall be as valid as the original.

I understand that, if hired, my employment with the City of Pottsville would be at will and, as such, and within the provisions of state and federal law regarding public employment, I can be dismissed at any time, with or without notice, for any reason or no reason.

I also understand that only written representations and promises of this employer will be enforceable.

Signature of Applicant

Date

NOTICES TO FORMER EMPLOYERS & REFERENCES OF:

(Print Applicant's Name)

This is to inform you that I have made application for employment with the City of Pottsboro, 528 Highway 120E, P. O. Box 1089, Pottsboro, Texas, 75076-1089. In order for the City of Pottsboro to fully evaluate my qualifications and experience, I am requesting that you release any pertinent information that you may have as a part of a formal personnel file, or personal knowledge.

Your cooperation with the City of Pottsboro is appreciated.

Applicant's Signature

Social Security Number

Date