



# City of Cisco

## Application for Employment

Our policy is to provide equal employment to all qualified persons without regard to race, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date: \_\_\_\_\_

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle name: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.)

Yes  No

Have you ever been convicted of a felony? (This will not necessarily affect your application.)

Yes  No

If yes, please describe conditions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Employment Desired

Position applied for: \_\_\_\_\_

How did you hear of this opening? \_\_\_\_\_

Have you ever applied for employment here?  Yes  No

When? \_\_\_\_\_

Where? \_\_\_\_\_

Have you ever been employed by this company?  Yes  No

When? \_\_\_\_\_

Where? \_\_\_\_\_

Are you presently employed?  Yes  No

May we contact your present employer?  Yes  No

Date you can start: \_\_\_\_\_

Desired starting salary: \_\_\_\_\_

**Education**

<u>School Name and Location</u>	<u>Year</u>	<u>Major</u>	<u>Degree</u>
High School _____	_____	_____	_____
College _____	_____	_____	_____
College _____	_____	_____	_____
Post Graduate _____	_____	_____	_____
Other Training _____	_____	_____	_____

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any scholastic honors received and offices held in school.

\_\_\_\_\_  
\_\_\_\_\_

Are you planning to continue your studies?  Yes  No

If yes, where and what course of study?

\_\_\_\_\_  
\_\_\_\_\_

**Employment History** (Start with most recent employer; attach additional pages if necessary)

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Started: \_\_\_\_\_ Starting Wage: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Wage: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

May we contact?  Yes  No

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Started: \_\_\_\_\_ Starting Wage: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Wage: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

May we contact?  Yes  No

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Started: \_\_\_\_\_ Starting Wage: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Wage: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

May we contact?  Yes  No

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Started: \_\_\_\_\_ Starting Wage: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Wage: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

May we contact?  Yes  No

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Started: \_\_\_\_\_ Starting Wage: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Wage: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

May we contact?  Yes  No

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Date Started: \_\_\_\_\_ Starting Wage: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Wage: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

May we contact?  Yes  No

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**References**

List three personal references not related to you who have known you for more than one year.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address \_\_\_\_\_

**Emergency Contact**

In case of emergency, please notify:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Please read before signing:**

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I authorize my previous employers, schools, or persons listed as references to give any information regarding employment or educational record. I agree that this company and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this company, I will comply with all rules and regulations as set by the company in any communication distributed to the employees.

I understand that employment at this company is “at will”, which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason, not prohibited by statute. All employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## BACKGROUND CHECK AUTHORIZATION

DISCLOSURE AND AUTHORIZATION - Pursuant to the Federal Fair Credit Reporting Act (FCRA), 15 U.S.C. 1681 and Federal Trade Commission Regulations contained in 16 C.F.R. Part 601, Appendix C, the City of Cisco discloses to you that a consumer report, which may include your criminal history, driving record, previous and current employment history and other background information, may be obtained for employment purposes as part of the pre-employment background investigation to evaluate your eligibility for hire and at any time during your employment.

I voluntarily and fully acknowledge and authorize the City of Cisco to obtain a Computerized Criminal History (CCH) and consumer report as part of the hiring process. I understand that a Computerized Criminal History (CCH) verification check will be performed by accessing the Texas Department of Public Safety Secure Website and the results will be based on name and DOB identifiers. Because the name-based information is not an exact search and only fingerprint record searches represent true identification to criminal history, the organization conducting the criminal history check for background screening is not allowed to discuss any criminal history record information obtained using the name and DOB method. I will direct any questions I have regarding this process to Human Resources. If I am hired, this authorization shall remain in effect and shall be considered an ongoing authorization for the City of Cisco to obtain consumer reports at any time during my employment period.

Print Name: \_\_\_\_\_  
(First) (Middle) (Last)

Other Names Used: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

I certify that the above information is true and correct to the best of my knowledge. I acknowledge my understanding of this DISCLOSURE AND AUTHORIZATION statement, and authorize the City of Cisco to conduct a background investigation in accordance with the contents of this statement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date