

CITY OF EAGLE LAKE EMPLOYMENT APPLICATION

PERSONAL INFORMATION	Position Applied For		
Last Name	First	Middle	Social Security Number
Street Address			Home Telephone
City, State, Zip			Business Telephone
Are you related to a member of the City Council or a City employee?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes" - Who? Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No Age if under 18

EMPLOYMENT HISTORY	Give complete full-time and part-time employment, including military, for the last 5 years. Start with present or most recent employer. Attach additional sheets if necessary.		
Company Name			Telephone
Address			Employment Dates From To
Name of Supervisor			Annual Salary
Give Job Title and Describe Your Work			Reason For Leaving
Company Name			Telephone
Address			Employment Dates From To
Name of Supervisor			Annual Salary
Give Job Title and Describe Your Work			Reason For Leaving
Company Name			Telephone
Address			Employment Dates From To
Name of Supervisor			Annual Salary
Give Job Title and Describe Your Work			Reason For Leaving
Company Name			Telephone
Address			Employment Dates From To
Name of Supervisor			Annual Salary
Give Job Title and Describe Your Work			Reason For Leaving
Company Name			Telephone
Address			Employment Dates From To
Name of Supervisor			Annual Salary
Give Job Title and Describe Your Work			Reason For Leaving

APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT DISCRIMINATION BECAUSE OF RACE, COLOR, SEX, AGE, NATIONAL ORIGIN, HANDICAP OR VETERAN STATUS.

EDUCATION		Attach additional sheets or resume to this application, if necessary, to fully explain your qualifications for the position you are applying for.			
School	Name and Location	Course of Study	No. of Years Completed	Did You Graduate	Degree or Diploma
Graduate					
College					
Business/Trade/Tech					
High School					
Elementary					

Describe any training received that is relevant to the position for which you are applying.

LICENSES	Do you have a valid Texas Drivers License?	Class	Drivers License Number
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

List all professional licenses you may hold - specify type, date & expiration date.

MISCELLANEOUS	Do you have any disabilities that would interfere with doing the job applied for?	If "Yes" - what?
	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Specify any equipment or office machinery you operate

Person to notify in case of emergency (give name, address and telephone number)

Please indicate any additional experience and training you have had which, in your opinion, would qualify you for the position.

REFERENCES		Give the names, addresses and telephone numbers of three persons, other than relatives, who have knowledge of your character, experience and/or ability.		
Name	Address	Occupation	Telephone	

CERTIFICATION	NOTICE: a pre-employment drug and alcohol test will be given and a criminal history investigations completed before any job offer will be made.
<p>The information provided in this Employment Application is true, correct, and complete. I am aware that the information given herein will be investigated, with my full permission, and that any misrepresentation may cause my application to be rejected or employment terminated.</p> <p>I understand that acceptance of an offer of employment does not create a contractual obligation upon the City of Eagle Lake to continue to employ me in the future.</p> <p>I understand that any appointment will be at the discretion of the department head concerned, subject to the approval of the City Manager, and that this application is the property of the City and will become a part of my personnel file if I am accepted for employment.</p>	
<hr/> Date	<hr/> Signature of Applicant

THE CITY OF EAGLE LAKE REQUIRES ALL EMPLOYEES TO PARTICIPATE IN A DRUG AND ALCOHOL TESTING PROGRAM

CONSENT FOR CRIMINAL HISTORY INVESTIGATION

The City of Eagle Lake will conduct an investigation into the background of all prospective new employees. The investigation will include a criminal history search and obtaining a copy of the potential new employees driving record. The following information is needed for the background investigation and will be used exclusively for that purpose. Failure to fully disclose all information could lead to disqualification from employment by the City.

Last Name	First	Middle	Date Of Birth	Place Of Birth
Address		City	State	Zip
Race: Black ___ White ___ Asian ___ Other ___		Sex: Male ___ Female ___	Social Security Number	Drivers License Number
Height ___ Ft. ___ in	Weight	Aliases Or Other Names Used		
Criminal History:				
Have you ever been convicted of a felony?			Yes ___	No ___
Have you ever been convicted of a Class A or Class B misdemeanor?			Yes ___	No ___
Are you currently on Probation for any offense above a Class C misdemeanor?			Yes ___	No ___
<i>If answer is "yes" to any one of the questions above give the details below.</i>				
Date	Offense			
City/County/State				
Disposition				
Date	Offense			
City/County/State				
Disposition				
Date	Offense			
City/County/State				
Disposition				
Date	Offense			
City/County/State				
Disposition				
<i>List any other convictions on back of page.</i>				

I understand that the information provided herein will be used by the City of Eagle Lake to conduct a background investigation. I further understand that a final decision concerning my employment with the City of Eagle Lake will depend, in part, upon the results of this investigation. I hereby give my permission for a background investigation, including the City of Eagle Lake obtaining a copy of my driving record and any criminal history records held by the Texas Department of Public Safety and/or any other agency having such information..

_____ Date

_____ Signature