

**CITY OF ARLINGTON  
APPLICATION FOR EMPLOYMENT**

**GENERAL**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: (\_\_\_\_) \_\_\_\_\_

DATE AVAILABLE FOR EMPLOYMENT: \_\_\_\_\_

Are you employed now?                       YES                       NO

May we contact your present employer?     YES                       NO

If YES, give name: \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?  
 YES                       NO

Type of position you are seeking: \_\_\_\_\_

Wages desired: \_\_\_\_\_

Do you have a valid driver's license?        YES                       NO

License No./State: \_\_\_\_\_

Can you perform the essential functions of the job(s) for which you are applying?  
 YES                       NO

Have you pled guilty or been convicted of a felony?  
 YES                       NO

(Please note that a "YES" answer will not automatically bar you from consideration for employment.)

If YES, please explain:

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

This employer is an equal employment opportunity employer. All applicants will be considered without regard to age, color, national origin, religion, sex or other protected status in accordance with applicable federal and state equal employment opportunity laws.

**EDUCATION**

	ELEMENTARY	HIGH	COLLEGE	GRADUATE
SCHOOL NAME				
YEARS COMPLETED	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
COURSE OF STUDY				

**SPECIAL SKILLS, QUALIFICATIONS AND CONSIDERATIONS**

Summarize special skills and qualifications, volunteer activities, military experience, employment or other activities related to the job you are seeking:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES**

List 3 non-relatives who are familiar with your qualifications and actual work history and ability.

	<u>Name</u>	<u>Occupation/Relationship</u>	<u>Years Known</u>	<u>Telephone</u>
1.				
2.				
3.				

**EMPLOYMENT EXPERIENCE**

Start with your present or last job. List your last 3 jobs in order. Do not omit any job.

Employer: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_  
(month/year)

Address: \_\_\_\_\_ Telephone No.: (\_\_\_\_) \_\_\_\_\_

What did you like most about your job?

\_\_\_\_\_

\_\_\_\_\_

What did you like least about your job?

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

Employer: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_  
(month/year)

Address: \_\_\_\_\_ Telephone No.: (\_\_\_\_) \_\_\_\_\_

What did you like most about your job?

\_\_\_\_\_

What did you like least about your job?

\_\_\_\_\_

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

\_\_\_\_\_

Employer: \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_  
(month/year)

Address: \_\_\_\_\_ Telephone No.: (\_\_\_\_) \_\_\_\_\_

What did you like most about your job?

\_\_\_\_\_

What did you like least about your job?

\_\_\_\_\_

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

\_\_\_\_\_

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.  YES  NO

I will be responsible for familiarizing myself with all rules and regulations of the Employer as they presently exist or are later modified. I recognize that my employment can be terminated, at the discretion of the City of Arlington or at my option, without out notice, at any time, except as specifically set forth in writing in a current individual employment agreement signed by the City of Arlington.  YES  NO

