

APPLICATION FOR EMPLOYMENT

Revised October 30, 2019

	Last Name	First		Middle	Date
	Street Address				Home Telephone
	City, State, Zip				Business Telephone
	Have you ever applied for employment Yes □ No If yes: Month	nt with us?	Location		Social Security #
P E	Position Desired				Texas Drivers License #
R S	Are you available for full-time work? Yes □ No If not, what	hours can you work?			Desired Pay
O N A	Are you legally eligible for employme (Proof of citizenship or immigration v	ent in the United States?		Yes 🗆 No	When will you be available to begin work?
L	If employed and you are under 18, car	n you furnish a work permit?		Yes No	Will you work overtime if asked? Yes □ No
•	Other special training or skills (electric	cal, mechanical, clerical or tech	nical, etc.)		Can you work weekends when scheduled or requested?
					Yes 🗆 No
	Have you ever been convicted, plead guilty or no contest, or received deferred adjudication before: Yes No If yes, give date and detail of each conviction. (A conviction record is not an automatic ban to employment. The nature of the crime will be considered in relation to the position for which you are applying)				
	List any previous or current relatives that you may have that work for the City of Harker Heights.				
Please tell us how you heard about this position. " City of Harker Heights Webuks " P gy ur cr gt "Heegdqqm " Qy gtaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa					
	MILITARY	Did you serve in the U.S. Armed Forces?	Yes No	If Yes , what branch	
	Type discharge received (a less than honorable discharge is not an automatic ban to employment. The circumstances of the discharge will be considered in relation to the position for which you are applying)				
Descri	ibe any training received relevant to the	position for which you are apply	ing.		

How long have you lived at present address?(Years)	_(Months)
Please list previous address	

	School	Name and Location of School	Course of Study	No. Of Years Completed	Did You Graduate?	Degree or Diploma
E D	Graduate				Yes No	
U C	College				Yes No	
A T I	Business/Trade/ Technical				Yes No	
O N	High School				Yes No	

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	EMPLOYMENT	Please give accura employment recorrecent employer.	te, complete full-time and part-time d. Start with your present or most	
	Company Name and Address	Supervisor	Telephone	
			()	
		Employed - (month and year)		
1		From	То	
•	State Job Title and Describe Your Work	Weekly pay		
		Start	Last	
		Reason for Leaving	}	
		<u> </u>		
	Company Name and Address	Supervisor	Telephone	
			()	
_		Employed - (month	and year)	
2		From	То	
	State Job Title and Describe Your Work	Weekly pay		
		Start	Last	
		Reason for Leaving		

	Company Name and Address			Supervisor	Telephone	
					()	
2				Employed - (month and year	ar)	
3				From	То	
	State Job Title and Describe Your Wo	ork		Weekly pay		
				Start	Last	
				Reason for Leaving		
	Company Name and Address			Supervisor	Telephone	
	Company Panic and Paddress			Supervisor	()	
			-	Employed - (month and yea		
4				From	То	
	State Job Title and Describe Your Wo	ork		Weekly pay		
	State 300 Title and Describe Tour We	orn.		Start	Last	
			F	Reason for Leaving		
				C		
	DO NOT CONTACT					
			DO N	OT CONTACT		
abo	may contact the employers listed ve unless you indicate those you do	Employer Number(s)		OT CONTACT		
abo	may contact the employers listed ve unless you indicate those you do want us to contact.	Employer Number(s)		OT CONTACT		
abo	ve unless you indicate those you do want us to contact.		Reason			
abo	ve unless you indicate those you do		Reason			
abo not	ve unless you indicate those you do want us to contact. ase provide any information you feel we	e should know when we contact yo	Reason			
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Plea Con	ve unless you indicate those you do want us to contact. ase provide any information you feel wo	e should know when we contact yo t, if applicable	Reason ur previous emplo	oyers		
Plea Con	ve unless you indicate those you do want us to contact. ase provide any information you feel we	e should know when we contact yo t, if applicable	Reason	oyers	de explanation	
Plea Con	ve unless you indicate those you do want us to contact. ase provide any information you feel wo	e should know when we contact yo t, if applicable	Reason ur previous emplo	oyers	de explanation	
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Ple: Con Hav	we unless you indicate those you do want us to contact. ase provide any information you feel we misse regarding lapses in employment we you ever been discharged from a job chinery and equipment you can operate	e should know when we contact yo t, if applicable or forced, or asked to resign?	Yes No	oyers If yes, provid		
Ple Con Hav	we unless you indicate those you do want us to contact. ase provide any information you feel we meet regarding lapses in employment ye you ever been discharged from a job chinery and equipment you can operate pplying for an office position:	e should know when we contact yo t, if applicable or forced, or asked to resign?	Yes No	oyers If yes, provid Shorthand: approximate		

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\mathbf{S}	
List the name and current phone number of four individuals (<u>not</u> relatives or former employers), who can provide a per	rsonal reference:
R Name and address	Phone number
E 1.	
$\left \begin{array}{c} \mathbf{E} \\ \mathbf{F} \end{array} \right $	
$\begin{bmatrix} \mathbf{r} \\ \mathbf{E} \end{bmatrix}$ 2.	
$\begin{bmatrix} \mathbf{R} \\ \mathbf{R} \end{bmatrix}^2$	
E 3.	
$\left \begin{array}{c}\mathbf{N}\\ \simeq\end{array}\right $ 4.	
\mathbf{C}	
\mathbf{E}	
\mathbf{S}	
I certify that all the information provided in this application for employment is true, complete a	nd correct.
\mathbf{S}	
I understand and agree that the omission or misrepresentation of any fact in the application for sufficient reason for the City of Harker Heights to deny me employment. I also understand and	
N become employed by the City of Harker Heights and it is later discovered I have omitted or mis	srepresented any fact in
A this application, the City of Harker Heights may immediately terminate my employment upon omission or misrepresentation. I understand and agree that should I fail my background/crimin	
U will be grounds for disqualification or immediate termination.	ai myosuganon, uns
R	
E	
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