



# APPLICATION FOR EMPLOYMENT

Please COMPLETE ALL ITEMS, if not applicable, indicate N/A

Title of Job Applying for: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip

Telephone No.: \_\_\_\_\_  
Cell Phone No. Alternate Cell Phone No.

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

## Personal:

Are you over the age of 18? Yes \_\_\_\_\_ No \_\_\_\_\_

If you are hired for a position, can you show proof of U.S. Citizenship? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a registered alien? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Type: \_\_\_\_\_

Have you ever been employed by the City of Big Sandy? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, date and department: \_\_\_\_\_

Date available for work: \_\_\_\_\_

Are you able to work: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_

Are there any restrictions to the hours you can work? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Are you related to any employee or City Official of the City of Big Sandy? Yes \_\_\_ No \_\_\_

If yes, whom: \_\_\_\_\_ Relationship: \_\_\_\_\_

**The City of Big Sandy is an EQUAL OPPORTUNITY EMPLOYER**  
Qualified applicants are considered for all positions without regard to race, color, sex, religion, national origin, handicap, age, or veteran's status.

**EDUCATION**

Type of School	Name and Address	No. of Years Attended	Grad. Yes/No	Major	Degree
High School or GED (circle one)					
University					
Other					

**Military Service Record:**

Are you a veteran? Yes \_\_\_\_\_ No \_\_\_\_\_

Branch: \_\_\_\_\_ Date Entered: \_\_\_\_\_ Date Discharged: \_\_\_\_\_

Special Training: \_\_\_\_\_ Rank: \_\_\_\_\_

Have you ever been arrested, cited, convicted, pled guilty or no contest to a misdemeanor or felony offense?  
 Yes \_\_\_\_\_ No \_\_\_\_\_ (Important: For purposes of employment with the City of Big Sandy, "convictions" include sentenced to confinement, paid fine, time served, placed on probation (including deferred adjudication) and court-ordered restitution.)

If so, please explain. \_\_\_\_\_  
 \_\_\_\_\_

A conviction record will not necessarily disqualify you from employment. Your case will be considered in relationship to the requirements of the position.

Do you have any physical, mental, or medical impairments that will impede your ability to satisfactorily perform the job applied for? Yes \_\_\_ No \_\_\_ If so, what type(s) of job accommodations will enable you to perform the job? \_\_\_\_\_  
 \_\_\_\_\_

**Qualifications Summary:** In detail, list qualifications and skills you possess

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

Employer Name:	Area Code/ Phone:	Explain Duties:	Employment Date:
			From:
			To:
Address: City, State, Zip			Annual Salary: Starting                  Ending
Job Title:			May we contact this Employer?
			Yes___No___
Reason for Leaving:			

Employer Name:	Area Code/ Phone:	Explain Duties:	Employment Date:
			From:
			To:
Address: City, State, Zip			Annual Salary: Starting                  Ending
Job Title:			May we contact this Employer?
			Yes___No___
Reason for Leaving:			

**PERSONAL REFERENCES (not relatives)**

Name & Address	Phone	Occupation – how known
1.		
2.		
3.		

I, \_\_\_\_\_, certify that the answers given herein are true and complete to the best of my knowledge. I hereby authorize the City of Big Sandy the right to investigate all statements contained in this application. In the event of employment, I understand that false statements on the application shall be grounds for dismissal. I also understand that by submitting this application, I am subject to a pre-employment physical examination and drug and alcohol testing, and further, will be subject to a criminal background check. I agree to immediately notify the City of Big Sandy if I am convicted of, receive deferred adjudication in, or otherwise plead guilty or no contest to a felony, or any crime involving dishonesty or breach of trust, while my application is pending or during my period of employment, if hired.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**Equal Employment Opportunity (EEO) DATA SHEET**

**IMPORTANT – ALL APPLICANTS READ:** The commitment of the City of Big Sandy to a policy of equal employment opportunity requires that certain information be gathered and documented for statistical purposes. The following information is requested in order to assist us in complying with EEO reporting guidelines. This information will not be used for making interviewing or hiring decisions.

Name \_\_\_\_\_ Date of Application \_\_\_\_\_  
Last First M.I.

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

Date of Birth \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Driver's License (state & number) \_\_\_\_\_ Expiration date \_\_\_\_\_

How were you referred to us?

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**ETHNIC CATEGORY**

- |   |   |
|---|---|
| <input type="checkbox"/> White              | <input type="checkbox"/> Asian or Pacific Islander                            |
| <input type="checkbox"/> Black.             | <input type="checkbox"/> American Indian or Alaskan Native.                   |
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> I do not wish to voluntarily supply this information |

**OTHER**

A Veteran – A person who served on active duty for a period of more than 180 days, who received other than a dishonorable discharge, who does not fall into any of the other categories outlined below. (1)

A Disabled Veteran – A person who served has 30 percent or more disability and is entitled to disability compensation by the Veteran's Administration who was released from the military service (active duty) for a disability incurred or aggravated in the line of duty. (2)

A Vietnam Veteran – A person who served on active duty for more than 180 days (any part of which was performed during the period of August 5, 1964 through May 7, 1975) and who was discharged or released from the military service with other than a dishonorable discharge. (3)

A Disabled Vietnam ERA Veteran – A person who meets both the criteria stated in #2 & #3.

Other – A person who is not a veteran and does not fall into any of the other Veteran categories listed above.

A Qualified Handicapped Individual – A person who has a physical or mental impairment which substantially limits one or more of that person's major life activities, or has a record of such impairment, and is capable (qualified) of performing a particular job with reasonable accommodation to their handicap.

I do not wish to voluntarily supply this information.