APPLICATION FOR EMPLOYMENT

City of Overton 1200 S. Commerce Overton, Texas 75684

INSTRUCTIONS: Please complete and sign all blanks accurately and legibly to be considered. We may verify all information you provide. A FALSE STATEMENT OR OMISSION MAY RESULT IN DISQUALIFICATION FOR EMPLOYMENT OR DISCHARGE, IF EMPLOYED. The City of Overton is an Equal Opportunity Employer. In accordance with the Civil Rights Acts of 1964 and 1991, as amended, the Age Discrimination in Employment Act, and the Americans with Disabilities Act, the City of Overton prohibits discrimination in any employment because of race, color, sex, religion, national origin, age or disability. No question on this application is intended to secure information to be used for discriminatory purposes.

Date:				
Position applying for: (To be considered as a complete appli	cation, the applicant mus	Date you would be state the specific job applying	available to begin work	x:
Check all types of work you will accept	: Full-time	☐ Temporary ☐ Minim	num wage requirements	3:
Have you previously worked or do you c	currently work for the City of	of Overton? Yes 🗆 No 🛭	3	
If "Yes", when and what department:				
Do you have any relatives, by blood or b	by marriage, working for or	holding office for the City of C	Overton? Yes	
If "Yes", please state Name, Department	and Relation:			
		PERSONAL		
Name			Social Security No.	
Last	First	Middle	•	
Present AddressStreet/	P.O. Box		Telephone No	
Succi	Texas		Mobile No	
designate: A citizen or a national Immigration and Naturalization Service If you are hired can you provide pro-	vice to work indefinitely			☐ An alien authorized by the
Do you have a valid Driver's license	e? Yes □ No □	Class A □ B □	С□	CDL? Yes □ No □
Driver's License No.		State	Year Expires	
Have you ever been issued a citation	n for any moving traffic	violations? Yes	☐ If yes, please exp	lain:
Have you ever been arrested, convious offense classified as a Class B misde conduct, DWI, etc.)? Yes □ No	emeanor or above, or any	offense relating to moral tu		
1. Arrested: Date	Location:	What were you ch	narged with?	
Result				
2. Arrested: Date	Location:	What were you ch	narged with?	
Result				
3. Arrested: Date	Location:	What were you ch	narged with?	
Result				

NOTE: PRIOR TO EMPLOYMENT, APPLICANTS MAY BE INVESTIGATED AS TO CONVICTION FOR PRIOR CRIMINAL OFFENSES. Answering 'yes' may not automatically disqualify you, but a false statement or omission of information will. A prior conviction will be considered in relationship to the requirements of the job for which you are applying. Failure to answer the above questions truthfully may result in immediate dismissal if hired. Answers of "yes" to questions will not necessarily disqualify you from employment.

		<i>E</i> .	DUCATION		
ligh School or GED G	raduate? Yes □ N	lo □ School Name an	d City:		
		Name/City		Course/Maior	Type of Degree or
College, Business, Techi	nical Schools Attende	ed:			<u>Certificate</u>
rade School/Vocationa	l Schools				
re you fluent in a langu	uage other than Engl	lish? Please indicate in	each area your degree of	f fluency (excellent,	good, fair).
Language	Reading	Speaking	Understanding ———	Writing	_
					_
					_
ist any awards or hono	rs received pertainin	g to your education _			
		MIL	ITARY		
Have you served in the	U.S. Armed Forces?				
		Yes 🗆 No 🗆			
Dates of service: From	То	Yes	If yes, what Branch? _nest Rank Held:		Type of discharge:
Dates of service: From	То	Yes	If yes, what Branch?		Type of discharge:
Dates of service: From	То	Yes	If yes, what Branch? _nest Rank Held:		Type of discharge:
Dates of service: From List duties/special training	ToTo ng and/or awards rec	Yes No High	If yes, what Branch? _nest Rank Held:		Type of discharge:
Dates of service: From List duties/special training	ToTo ng and/or awards rec	Yes No High	If yes, what Branch?		Type of discharge:
List duties/special training	ng and/or awards rec	Yes No High	If yes, what Branch?		Type of discharge:
Dates of service: From List duties/special training f requested can you pro List any qualifications,	To ng and/or awards rec ovide a copy of disch skills, on-the-job tra	Yes No High	If yes, what Branch?		Type of discharge:
Dates of service: From List duties/special training f requested can you pro	To ng and/or awards rec ovide a copy of disch skills, on-the-job tra	Yes No High	If yes, what Branch?		Type of discharge:
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EMPLOYMENT HISTORY

 $(List\ all\ jobs\ beginning\ with\ your\ most\ recent\ employer.\ \textit{Use\ additional\ pages\ as\ necessary})$

Employer	From _	То	Ending Salary
Address Street City Business telephone number: Duties		Zip Co-Worker's Name: Position/Title:	
□Full-time □Part-time Reason for leaving: Was 2 week notice given? Yes □ No □ May we contact this employer? Yes □ No □		Eligible for Rehire:	
Employer Address Street City Business telephone number:	State	Supervisor's Name: Zip Co-Worker's Name:	
Duties			
Employer Address Street City Business telephone number:		Supervisor's Name: Zip Co-Worker's Name: Position/Title:	Ending Salary
□Full-time □Part-time Reason for leaving: Was 2 week notice given? Yes □ No □		Eligible for Rehire:	

REFERENCES

List persons other than former employers and relatives who know you well enough to provide information on work ethics and/or character.

Name:	
Address:	
Residence Phone:	
Occupation:	Years Known:
Business Address:	
Describe your relationship with this person:	
Name:	
Address:	
Residence Phone:	
Occupation:	
Business Address:	
Name:	
Address:	
Residence Phone:	
Occupation:	
Business Address:	
Describe your relationship with this person:	
Name:	
Address:	
Residence Phone:	
Occupation:	Years Known:
D : A11	
Business Address:	
Describe your relationship with this person:	

TERMS OF EMPLOYMENT

PLEASE READ CAREFULLY and then initial each statement below to indicate you understand and agree with the statement.

1. If I misrepresent or deliberately omit a fact in my application, the City may be justified in refusing employment to me or, if I am already employed by the City, in terminating my employment
2. I consent to medical or psychological exams required or requested by the officials of the City as permitted under applicable law.
3. Depending on the nature of the position I am seeking, I understand the City of Overton may conduct pre-employment testing, including an agility test, to assess my qualifications for a particular position. If I require accommodations when the City administers pre-employment tests, I will notify the Human Resources Department, in writing when I submit my application.
4. If I am offered employment, I may be required to complete a post-offer physical examination at the expense of the City. The job offer is conditional on the results of the medical examination.
5. I will authorize any physician or hospital to release information that may be necessary to determine my ability to perform the essential functions of my job after I receive an employment offer or during the course of my employment with the City of Overton.
6. I authorize the City of Overton, in considering my employment, to make any contacts it deems necessary (including, but not limited to: previous employers, agencies of public record or credit reporting agencies as allowed by the Fair Credit Reporting Act.)
7. If hired, I can be terminated or transferred to another position with or without cause at any time at the option of the City of Overton.
8. If hired, I agree to a search of any City owned premises assigned to me and I hereby waive all claims for damages on account of such search.
9. If hired by the City of Overton, such employment is for an indefinite period of time and the City of Overton can change wages, hours of employment, shift assignments, benefits, positions, and conditions of employment at any time.
10. This application is the property of the City of Overton and will become a part of my personnel file if I am accepted for employment I further understand this is an application for employment and no employment is being offered and the City of Overton, in receiving this application, has made no contract of employment with me and has not in any way guaranteed my future employment.
11.1 shall never construe this application or any other communication, verbal or written, given or made by anyone during the application process for employment by the City of Overton as constituting either a contract of employment or a guarantee of employment.
The information in this application is accurate, complete, and is subject to verification by the City of Overton. I understand that if I have given any false information in this application or if I have omitted any material facts, I may be disqualified from employment with the City of Overton or if hired, I may be discharged immediately upon discovery of such false statements or omissions.
I also understand the City of Overton is an "employment-at-will employer and the acceptance of an offer of employment does not create a contractual obligation upon the City of Overton to continue to employ me in the future.
Signature of Applicant Date:
Reference check authorization: I authorize any person or organization listed in this application and/or by whom I have been previously employed and/or any educational institution I have listed on this application to furnish any information they may have concerning me to the City of Overton. I understand the information provided by me may be used for the purpose of determining my eligibility. My previous employers may be contacted unless otherwise noted on this application. I hereby release, indemnify, and hold harmless any governmental entity, employer, or person furnishing information about me.
Signature of Applicant: Date:
Thank you for completing this application form and for your interest in working with us.