City of Bruceville-Eddy Application for Employment

143 Wilcox Drive Bruceville-Eddy, TX 76524 * 254-859-5964 Fax # 254-859-5779 www.bruceville-eddy.us

INSTRUCTIONS: Answer each question clearly and completely. **If questions are not applicable, enter "NA". Do not leave questions blank.** Be sure to sign when completed. Incomplete applications will not be considered. If more space is required for any question, please attach additional sheets as necessary. Resumes will not be accepted in lieu of an application; you may attach a resume to this completed application. This application will only be considered for the position applied for. To be considered for other positions you will need to complete an additional application per position. The City of Bruceville-Eddy is an Equal Opportunity Employer and all applicants will receive consideration without regard to race, color, religion, national origin, gender, sexual orientation and/or gender identity, age, and veteran or disability status.

General Information

Name:_____ Other names used:_____
Last, First, Middle Initial

Mailing Address:_____
Number, Street, City, State, Zip Code

Phone #:_____ Alternate Phone #:_____ E-mail: _____

Position Title Applying for:_____ Requisition #:_____ Supervisor: _____

Date you are available to work:_____ Are you 18 or older? ☐ Yes ☐ No If no, how old? _____

If hired, can you provide proof that you are legally entitled to work in the United States? ☐ Yes ☐ No

Do you speak, read, or write languages other than English? ☐ Yes ☐ No

If yes, what languages?_____ How well? ☐ Good ☐ Fair ☐ Excellent

Are you related by blood or marriage to any City employee or Council Member? ☐ Yes ☐ No If yes, please list below:

NAME	DEPARTMENT/DIVISION	RELATIONSHIP

Are you currently or have you ever been employed by the City? ☐ Yes ☐ No If yes, please list below:

POSITION	DEPARTMENT	DATES (From/To)	REASON FOR LEAVING
		_____ to _____	
		_____ to _____	

Driver's License or ID & Driving Record Information

Please check one: ☐ Driver's License ☐ ID If applicable- Is your license a Commercial License? ☐ Yes ☐ No

State Issued:_____ Number:_____ Expiration Date:_____ Type/Class:_____

* Please list and give date(s) or every moving violation and/or traffic accident in the last three (3) years.
(Report any DWI-DUI's under criminal history area on page 6)

Incident	Location	Date

Education

Name of High School: _____ ☐ Diploma ☐ GED ☐ Did not Graduate

Please indicate highest level of education achieved after High School: _____
Some College, Technical Certificate, Associates, Bachelors, Masters, PhD, etc

Please list additional education information below:

Copies of college transcripts are required when applying for positions requiring degrees; official transcripts are required within the first 30 days of employment.

Name/Type of School:_____Location (City, St):_____

Dates Attended:_____Date Graduated:_____Degree Achieved:_____

Major:_____Minor:_____If No Degree- Hours Completed:_____

Name/Type of School:_____Location (City, St):_____

Dates Attended:_____Date Graduated:_____Degree Achieved:_____

Major:_____Minor:_____If No Degree- Hours Completed:_____

Name/Type of School:_____Location (City, St):_____

Dates Attended:_____Date Graduated:_____Degree Achieved:_____

Major:_____Minor:_____If No Degree- Hours Completed:_____

* If you need additional space to list your education history, attach a sheet providing the same information requested above.

Certifications

If Certification, Registration, or a Special License is required for the position, then please complete the following:

License/Certification:_____Date Issued:_____Date Expires:_____

Issued by/Location of Issuing Authority:_____License #:_____

License/Certification:_____Date Issued:_____Date Expires:_____

Issued by/Location of Issuing Authority:_____License #:_____

Other Skills Please list any additional training, machine/equipment operating experience, computer skills, technical skills, or professional knowledge that would support your application.

Employment History

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Include all employment for at least the past ten (10) years as well as military experience. You may add any other relevant experience including volunteer and internship experience. **Begin with your current or most recent job.** Employment history should include each position held, even those with the same employer. Do not use the comment "See Resume". If you need additional space to adequately describe your employment history, you may attach additional pages. This information will be used to determine if you meet the minimum work-related experience for the position you are applying for.

Job Title:_____ Employer:_____

Employer Address:_____

Supervisor's Name & Title:_____ Supervisor's Phone #:_____

Average Hours Worked Per Week_____ Starting Date:_____ Ending Date:_____ Final Salary:_____

If applicable, how many employees did you supervise?_____ May we contact this employer? ☐ Yes ☐ No

Specific Reason for Leaving or Wanting to Leave:_____

Summary of Job Duties and Responsibilities:

Job Title:_____ Employer:_____

Employer Address:_____

Supervisor's Name & Title:_____ Supervisor's Phone #:_____

Average Hours Worked Per Week_____ Starting Date:_____ Ending Date:_____ Final Salary:_____

If applicable, How many employee's did you supervise?_____ May we contact this employer? ☐ Yes ☐ No

Specific Reason for Leaving or Wanting to Leave:_____

Summary of Job Duties and Responsibilities:

Employment History- continued

Job Title:_____ Employer:_____

Employer Address:_____

Supervisor's Name & Title:_____ Supervisor's Phone #:_____

Average Hours Worked Per Week_____ Starting Date:_____ Ending Date:_____ Final Salary:_____

If applicable, How many employee's did you supervise?_____ May we contact this employer? ☐ Yes ☐ No

Specific Reason for Leaving or Wanting to Leave:_____

Summary of Job Duties and Responsibilities:

Job Title:_____ Employer:_____

Employer Address:_____

Supervisor's Name & Title:_____ Supervisor's Phone #:_____

Average Hours Worked Per Week_____ Starting Date:_____ Ending Date:_____ Final Salary:_____

If applicable, How many employee's did you supervise?_____ May we contact this employer? ☐ Yes ☐ No

Specific Reason for Leaving or Wanting to Leave:_____

Summary of Job Duties and Responsibilities:

Employment History- continued

Job Title:_____ Employer:_____

Employer Address:_____

Supervisor's Name & Title:_____ Supervisor's Phone #:_____

Average Hours Worked Per Week_____ Starting Date:_____ Ending Date:_____ Final Salary:_____

If applicable, How many employee's did you supervise?_____ May we contact this employer? ☐ Yes ☐ No

Specific Reason for Leaving or Wanting to Leave:_____

Summary of Job Duties and Responsibilities:

Personal References

Please do not list former employers or relatives. Those listed should be familiar with your qualifications for employment.

Name and Occupation:	City/State of Residence:	Phone Number:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please Read Before Signing

I certify that all information in this application is true and correct. I understand and agree that any false information, misrepresentation, or concealment of fact is sufficient grounds for either my immediate discharge without recourse, or refusal of employment by the City of Bruceville-Eddy.

I understand and agree that all information in this application may be verified by the City of Bruceville-Eddy. I also understand that any employment is subject to a satisfactory check of references, and that once a contingent offer of employment is made, I must satisfactorily pass a post job offer physical, which will include drug and alcohol tests.

I authorize all individuals and organizations named or referenced to in this application, or given otherwise by me as references, to give The City of Bruceville-Eddy all information relative to my employment, work habits, and character. I authorize The City of Bruceville-Eddy to verify and investigate the status of my driver's license and to conduct any background check it deems necessary, including review of criminal history records. I hereby release the City, and any individual who provides or obtains information pursuant to this authorization, from any and all liability for damages of any kind that may result to me on account of compliance, or attempts to comply with this authorization. I am also aware that my application is subject to the Texas Open Records Law and may be released as a public document.

I understand that this is not an employment agreement between The City of Bruceville-Eddy and the applicant.

_____ _____

Applicant Signature Date

NOTE: This page will be removed from the application before it is submitted to the Hiring Supervisor.

Applicant Name:_____ Social Security Number:_____

Position Applied For:_____ Requisition #:_____

Criminal History

The City of Bruceville-Eddy conducts criminal history checks on all employees. Please fully answer the following questions. (Please note: a conviction does not necessarily mean that your application will be automatically disqualified from employment consideration.)

Are you currently on felony probation, felony deferred adjudication, or parole?

Yes ☐ ☐ No

1. Have you ever been convicted, placed on deferred adjudication or community supervision, or pleaded guilty or no contest to a felony offense?

☐ Yes ☐ No

2. Have you ever been convicted, placed on deferred adjudication or community supervision, or pleaded guilty or no contest to a misdemeanor offense other than a traffic violation?

☐ Yes ☐ No

If you answered "Yes" to any of the above 3 questions, **please explain below** with the dates and nature of each offense, the name and location of each court, and the disposition of each case. You must include any DUI/DWI offenses. Additional sheets available.

Dates (Month/Year)_____ ☐ Felony ☐ Misdemeanor Nature of Offense _____

Case Disposition (current status)_____

Name and Location of Court _____

Dates (Month/Year)_____ ☐ Felony ☐ Misdemeanor Nature of Offense _____

Case Disposition (current status)_____

Name and Location of Court _____

I certify that all above information is true and correct. I understand and agree that any false information, misrepresentation, or concealment of fact is sufficient grounds for either my immediate discharge without recourse, or refusal of employment by the City of Bruceville-Eddy.

X_____ Applicant Signature Date _____

Voluntary Information – For Equal Opportunity Employment Purposes: Your completion of the section below is voluntary; refusing to complete this section will not affect the evaluation of your application. The commitment of the City of Bruceville-Eddy to a policy of equal employment opportunity requires that certain information be gathered and maintained for government record-keeping

Race, please check one: ☐ American Indian/Alaskan Native ☐ Asian ☐ Black/African American ☐ Hispanic ☐ Native Hawaiian/Pacific Islander ☐ Two or more races ☐ Other/Unknown ☐ White

Gender: ☐ Male ☐ Female ☐ Other/Unidentified

Please tell us how you heard about this position:

☐ City Employee
☐ City Website
☐ Walk-In
☐ Waco Tribune-Herald
☐ TML Website
☐ Other Internet Job Listing Texas
☐ Workforce Commission
☐ Other_____