

**City of
Point**

POSITION FOR WHICH YOU ARE APPLYING

POSITION: _____

PLEASE WRITE CLEARLY, OR TYPE, AND ANSWER ALL QUESTIONS

Questionnaire (if applicable) must be completed and submitted with application

Date: _____ Social Security No. _____

Name Last: _____ Middle: _____ First: _____

Address _____
Street Apt.# City State Zip Code

Telephone _____ (Day) Cell Phone Number _____

Email Address _____ Drivers License # _____

Are you known to employers/references/schools by another name? If yes, name _____ No

Have you worked for the City of Point before or do you now? If yes, dates _____ No

Department: _____

Have you ever been convicted of a crime? ☐ Yes ☐ No If yes, explain _____

Have you ever had any traffic violations? ☐ Yes ☐ No If yes, explain _____

INFORMATION REGARDING CONVICTION RECORD WILL NOT NECESSARILY BAR AN APPLICANT FROM EMPLOYMENT. INDIVIDUAL CIRCUMSTANCES WILL BE CONSIDERED RELATIVE TO THE JOB SOUGHT.

How did you hear about us? _____

Educational Background (Attach copy of transcripts)					
	Year Graduated	Institution and City, State	Certificate Attained	Major/Area of Study	Credit Hours or Academic Hours
High School					
College or University					
Graduate School					
Vocational, Technical, Business School					

Work Experience - List your last three employers *or* last three positions, starting with the most recent. Attach a *Supplement Employment Application* or other pages if you want to include more positions.

Month & Year From	Name/Address of Employer	Reason for Leaving	Paid Employment Unpaid Employment
To:			Full-time Part-time Number of hours per wk:
			Ending Pay \$ per

Title: _____ Duties: _____

List Computer Skills used in this Position _____

Largest Number of People Supervised _____ Supervisor's Name _____ Supervisor's Phone No. _____

Month & Year From	Name/Address of Employer	Reason for Leaving	Paid Employment Unpaid Employment
To:			Full-time Part-time Number of hours per wk:
			Ending Pay \$ per

Title: _____ Duties: _____

List Computer Skills used in this Position _____

Largest Number of People Supervised _____ Supervisor's Name _____ Supervisor's Phone No. _____

Month & Year From	Name/Address of Employer	Reason for Leaving	Paid Employment Unpaid Employment
To:			Full-time Part-time Number of hours per wk:
			Ending Pay \$ per

Title: _____ Duties: _____

List Computer Skills used in this Position _____

Largest Number of People Supervised _____ Supervisor's Name _____ Supervisor's Phone No. _____

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Other Employment: (Account for all employment in at least the last 10 years)

Name and Address of Company

Position Held

Employment Dates

Vocational Licenses/Registrations (Attach copy of documents)

Type	License/Registration Number	Issuing Authority	Issue Date	Expiration Date

Computer Skills (name software and hardware)

SUPPLEMENTAL WORK EXPERIENCE

References Include supervisors and persons **we may contact** to verify your performance and qualifications

Name	Occupation	Mailing Address
Your Supervisor? Yes No	Organization	Phone (Day)
Name	Occupation	Mailing Address
Your Supervisor? Yes No	Organization	Phone (Day)
Name	Occupation	Mailing Address
Your Supervisor? Yes No	Organization	Phone (Day)

AFFIRMATION

I affirm that the facts set forth above in my application for employment are true, correct and complete to the best of my knowledge. I understand that I may be required to submit information not requested on this application form; that the employing agency may verify any information provided by me in the employment process; and that incomplete information or omission of my signature is just cause for rejection of my application.

I understand and agree that, if hired my employment would be contingent upon me providing documents verifying my identity and as well as conditions specific to the position for which I am applying. I also understand that any omission of information or erroneous information provided in any part of the employment process would be sufficient cause for discharge. I agree that the employing agency may, at its sole discretion, provide compensatory time off in lieu of overtime pay if I were employed in a nonexempt position and if there were no existing agreement to the contrary.

Signature of Applicant

Date

Applications are kept on file for a period of 6(six) months.