

Application for Employment

Town of Fairview - 372 Town Place - Fairview, TX 75069 972 562-0522 (phone) - 972 548-0268 (fax)

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

PLEASE <u>PRINT LEGIBLY</u> OR <u>TYPE</u>. ANSWER <u>ALL</u> QUESTIONS. RESUME WILL <u>NOT</u> BE ACCEPTED IN LIEU OF COMPLETED APPLICATION.

Position(s) applying for:		Da	te of application:		
Name:			Social Security #:	XXX—XX—	
(Last) (First)	(1)	/liddle)			
Address:(Number & Street) (A	Apt. #)	(City)		(State)	(Zip Code)
Telephone: Cell	Phone/Other:	E-	mail address:		
Are you over the age of 18?()yes () no	If "no," can you provide	a work permit? () ye	es () no		
Have you been employed by the Town of Fairvio	ew? () yes () no If y	ves, position(s) and da	tes:		
Do you have relatives currently working for or he and relationship: (Town po					umstances.)
Are you legally eligible for employment in the Ucurrent employer? () all () current (If hire	nited States? () yes od, it will be necessary to	() no Are you eligib provide proof of identit	le to work for all y and legal autho	employers in trity to work in	the US or only the US.)
Date available for work: Desired	d rate of pay:	Type of employme	ent desired: () F	FT () PT () Temporary
If driving is required in the position for which you	ı are applying: Type of li	cense: Lic #: _	State:	Exp.	Date:
years, have you been convicted of or pled "guilt" () yes () no If yes, state nature of offense EDUCATION: Your educational record will Starting with the most recent school you attended	b, when and where, and o	disposition:			are applying.
School (include city & state)	No. Years Attended	Did You Gradu (circle one)	_	eived e one)	<u>Major</u> Subject
		yes/no	GED/diplo certificate	ma/degree /other/NA	
		yes/no	GED/diplor certificate,		
		yes/no	GED/diplo certificate	ma/degree /other/NA	
		yes/no		ma/degree e/other/NA	

May we contact your present employer?	() yes	() no	() later	
Employer:	Supervisor's	s Name & Title:		Current Salary:
Address:				Telephone Number (including area code
Dates of Employment: From: To:	Position Titl	e:		Reason for Leaving or Wanting to Leave
Description of Duties:				1
Specific office/clerical, computer/software	skills utilized; mach	ninery/equipment op	erated & certific	ation/license required:
Employer:	Suporvisor's	s Name & Title:		Current Salary:
Employer.	Supervisors	s Name & Title.		Current Salary.
Address:				Telephone Number (including area code
Dates of Employment: From: To:	Position Titl	e:		Reason for Leaving or Wanting to Leave
Description of Duties:				
Specific office/clerical, computer/software s	skills utilized; mach	ninery/equipment op	erated & certific	ation/license required:
Employer:	Supervisor's	s Name & Title:		Current Salary:
Address:				Telephone Number (including area code
Dates of Employment: From: To:	Position Titl	e:		Reason for Leaving or Wanting to Leave
Description of Duties:				
Specific office/clerical, computer/software	skills utilized; mach	ninery/equipment op	erated & certific	ation/license required:
Employer:	Supervisor's	s Name & Title:		Current Salary:
Address:				Telephone Number (including area code
Dates of Employment:	Position Titl	e:		Reason for Leaving or Wanting to Leave
From: To:				
From: To: Description of Duties:				

REFERENCES: not related to you.	Provide three additional business, v	work, personal, and/or school re Telephone Number	ferences who are not former su Relationship to You	pervisors and who are # Yrs. Known
1)				
2)				
3)				
	IFORMATION/COMMENTS: affiliations, honors, awards and acco		should be considered in review	ing your qualifications,
	ATEMENT: I certify that all in view is true, complete and con		d in order to apply for and	d secure work with
and obtain informauthorities and e application, result Fairview, its age information, in a	prize, without reservation, the mation from all references (aducational institutions and to me or job interview. I hereby wints, employees or represental lawful manner, in the employinformation about me.	(personal and profession otherwise verify the accur waive any and all rights an atives, for seeking, gathe	al), employers, public a racy of all information pro- nd claims I may have reg- ring and using truthful ar	gencies, licensing vided by me in this arding the Town of nd non-defamatory
application is use	at the Town of Fairview does ed for the purpose of limiting by applicable local, state or fe	or eliminating any applica	ate in employment and nant from consideration for	o question on this employment on a
	t this application remains curre f Fairview and still wish to be on.			
and the Town of and with or without or contract for exepresentative of	iderstand that I am free to resi Fairview reserves the same ut prior notice, except as may employment for any specifie f the Town of Fairview is auth reements contrary to the foreg nager.	right to terminate my emp be required by law. This a ed period or definite dur horized to make any assu	oloyment at any time, with pplication does not constation. I understand that urances to the contrary a	h or without cause itute an agreement no supervisor or nd that no implied
I understand tha	at any offer of employment th	nat I may receive from th	e Town of Fairview is co	ontingent upon mv

I understand that any offer of employment that I may receive from the Town of Fairview is contingent upon my successful completion of Town paid, post offer, pre-employment alcohol and drug screen and medical examination, which includes a medical history, to determine my ability to perform the essential functions of my job, with or without reasonable accommodation. (Accommodation is reasonable if it does not impose an undue hardship to the Town and does not create a direct threat to your health and safety or the health and safety of others.) A pre-employment psychological/ polygraph examination or additional testing of job-related skills may also be required for some jobs. I hereby consent to having the results of any post offer, pre-employment examination(s) that I am required to take disclosed to the Town of Fairview.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

<u>DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.</u>	I certify that I have	∕e read, fully
understand and accept all terms of the foregoing Applicant Statement.		

NAME DATE