

#### CITY OF TOLAR

PO BOX 100

8712 W HWY 377

**TOLAR TEXAS 7647** 

PH. 254-835-4390

FAX 254-835-4392

## Employment Information Page

Thank you for tour interest in employment with the City Tolar. The City of Tolar is an equal opportunity employer an does not discriminate in its employment practices on the basis of race, color, religion, sex, national origin, age or disability. Reasonable accommodation for person with disabilities will be made upon request. APPLICATION INFORMATION - READ VERY CAREFULLY The City of Tolar accepts applicants for posted job vacancies only. All individuals who wish to be considered for employment are required to complete and sign an Employment Application. A resume may be attached; however the application form must be completely filled out in order to be accepted. Incomplete applications, including failure to sign the application form or applications that are not legible will not be accepted. We do not accept unsolicited applications or resumes. Every application must have the name of the open posted position listed. You must meet all of the qualifications of the position for which you are applying. If questions are not applicable, enter "N/A". Do not leave blank. The application form and all attachments become the property of the City of Tolar. Information provided by applicants is subject to disclosure in accordance with the provisions of the Texas Public Information Act.

All information on the application form and any attachments are subject to verification. If an applicant

is recommended for hire, the following checks will be made; an evaluation of the applicant's driver's license record, work references and a criminal history check. After a conditional officer of employment is made, a medical examination and a drug test will be required for all positions. Applicants refusing to cooperate, failing to show up for scheduled appointments and/or failing to successfully pass required

tests will be disqualified from consideration for employment with the City of Tolar.

### The CITY OF TOLAR is an EQUAL OPPORTUNITY EMPLOYER

We are interested in finding out just how well, or how poor, a job we are doing as an Equal Opportunity Employer.

The information you provide us will be used to study recruiting and employment patterns, and to determine whether information about the City job openings is reaching all segments of the community.

Please give us your cooperation by completing this questionnaire and returning it with your application.

DATE			_						
NAME									_
	LAST	Γ		FIRST				MIDDLE	
ADDRESS									_
			STATE						_
Title of Job A	pplying	For:							_
Is This Job:	□ Re	gular	□ Full-Time	□ Tem	porary,	Full-Time		□ Part-Time	□ Volunteer
Check one:					Birth l	Date:			
		Male			÷			<u>-</u> -5	
		Femal	e		Mo.	Day	Yr.		
Check Highe	st Level	of Educat	ion Completed						
	0 - 5	Grade		College	e				
	6 - 8	Grade		Bachel	or's Deg	gree			
	9 - 11	l Grade		Master	Degree	2			
	High	School		Law D	egree				
	Grad	or GED		Doctor	al				
	Jr Co	llege							
How	did you	learn ab	out this job?						
□N€	wspape	r							
□ Ci	ty Emplo	oyee							
□ Int	ernet								
□ Cit	ty Persoi	nnel Offic	e						
□ En	nployme	nt Agenc	y or TWC						

# City of Tolar

# **Employment Application**

Date of Application: Position Applied for:				Emergency Contact Information:					
					Name of Contact:				
Salary Requirement:					Relationship:				
Date av	ailable	for work:				Phone No.:			
How di	d you l	learn about th	is positior	1?		Alt. Number:			
		Relative		Walk-in					
		Friend		Other:		_			
——— Name	:							_	
		Last		Firs		Midd	lle		
Addre	ess:							_	
		Street			City	State	Zip		
Telepl	none N	Number:			Cell	Phone/Alternate N	Number: _		
						DL Number:		State:	
			Read ca	refully and ans	wer by circli	ng Yes or No to <u>ALL</u> que	estions		
1.	Are yo	•			City of Tolar?	Dalation ships		Yes / No	
2. 3.	If hired Have y	Relative's Na I can you provid ou previously v	de proof th	at you are legal	ly entitled to ar? If yes, pro	Relationship: work in the US? vide following info		Yes / No Yes / No	
		Dates of Emp	oloyment: _						
		Position and	Departmer	nt:					
		Reason for le	aving:						
4.						any job?			
5.	Are you	u at least 18 yea	rs of age?					Yes / No	
6.						ition?			
7.						if applicable)?			
8. 9.						if applicable)?are fluent? If yes, please l			
,,		-1. 2 v	G-(-)		<i>,</i> - <del></del>		ead □ Write		

### **EDUCATIONAL BACKGROUND**

High School Diploma	☐ Yes	□ No		
GED	☐ Yes	□ No		
High School attended:				
College or University attende	ed & location:			
College Degree? ☐ Ye	es 🗆 No	Comp	leted □ 1 yr □ 2 yrs □	3 yrs □ 4 yrs
List any Degrees/certification	ns earned:			-
	Skills	, Qualifications	, and Certificates	
☐ Microsoft Word ☐ M	icrosoft Excel	□ Outlook	□ 10-key by touch □	Other
☐ Windows (98, XP, Vista, 10	) 🗆 Internet			
List any other skill, qualificat you have applied:				the duties of the position for which
<u>Licenses, Certificates and otle</u> certificates)  Type of License	ner forms of recog			provide copies of licenses and ration Date
List mechanical equipment ye	-	lfully: (operator	_	·)
		Military Back	kground	
Have you ever served in the	Armed Forces of th	e United States	? Yes / No	
If yes, provide branch:		_ List Ra	nk at Entry:	
Last Rank Achieved:		<del></del>		
		REFEREN	ICES	
List name and telephone num three school or personal refer			erenced that are not re	lated to you. If not applicable, list
Name	Telephone Num	iber R	elationship	Years Known
	( )			
	( )			
	( )			

#### **EMPLOYMENT HISTORY**

Begin with your present or last job. Include all employment (last 10 years minimum, if applicable) including each position held (even with same employer). Summarize experience including technical, supervisory and managerial responsibilities including number of employees supervised. If you need additional space, you can copy and attach to application.

Resumes will not be accepted as substitution for employment history. However you may attach a resume in addition to your application.

MUST BE FILLED OUT COMPLETELY - DO NOT ATTACH A RESUME INSTEAD OF COMPLETING

Current or Most Decent Employ	or:				
Current or Most Recent Employ	er.				
Address:			City	State	Zip
Supervisor's Name & Title:			Phone Number:		
Supor visor o realing a risio.					
			May we contact this Salary/Hourly Rate:	employer?	Yes / No
Employed :			Salary/Hourly Rate.		
From:	To:		Begin:		End:
Job Duties:					
Job Title:					
Reason for Leaving?					
Reason for Leaving?					
Check appropriate box:		☐ Full Time	☐ Part Time	☐ Temporary/	Seasonal
Employer:					
Address:			City	State	Zip
O : 1 N O T''			Phone Number:		
Supervisor's Name & Title:			Phone Number:		
			May we contact this	employer?	Yes / No
Employed:			Salary/Hourly Rate:		
From:	To:		Begin:		End:
Job Duties:			-977		
Job Title:				-	
Reason for Leaving?					
Check appropriate box:		☐ Full Time	☐ Part Time	☐ Temporary/	Seasonal
l					

Current or Most Recent Employ	er:					
Address:			City	State	Zip	
Supervisor's Name & Title:			Phone Number:			
			May we contact this	employer?	Yes / No	
Employed :			Salary/Hourly Rate:			
From: Job Duties:	То:		Begin:		End:	
Job Title:						
Reason for Leaving?						
Check appropriate box:		☐ Full Time	☐ Part Time	☐ Temporary/	Seasonal	
Employer:						
Address:			City	State	Zip	
Supervisor's Name & Title:			Phone Number:			
			May we contact this	employer?	Yes / No	
Employed :			Salary/Hourly Rate:			
From:	т		Desire		End:	
	То:		Begin:		EIIU.	
Job Duties:	10:		Begin:		Ella.	
Job Duties: Job Title:	10:		ьеgin.		EIIU.	
Job Duties:	10:		Begin.		EIIU.	
Job Duties: Job Title:	10:	□ Full Time	□ Part Time	□ Temporary/		
Job Duties:  Job Title:  Reason for Leaving?	10:	□ Full Time		□ Temporary/		
Job Duties:  Job Title:  Reason for Leaving?	10:	□ Fult Time		□ Temporary/		
Job Duties:  Job Title:  Reason for Leaving?  Check appropriate box:	10:	□ Full Time		☐ Temporary/		
Job Duties:  Job Title:  Reason for Leaving?  Check appropriate box:  Employer:	10:	□ Full Time	□ Part Time		Seasonal	
Job Duties: Job Title: Reason for Leaving? Check appropriate box:  Employer: Address: Supervisor's Name & Title:	10:	□ Full Time	☐ Part Time  City  Phone Number:  May we contact this	State	Seasonal	
Job Duties: Job Title: Reason for Leaving? Check appropriate box: Employer: Address:	10:	□ Full Time	☐ Part Time  City  Phone Number:	State	Seasonal Zip	
Job Duties: Job Title: Reason for Leaving? Check appropriate box: Employer: Address: Supervisor's Name & Title: Employed: From:	To:	□ Full Time	☐ Part Time  City  Phone Number:  May we contact this	State	Seasonal Zip	
Job Duties: Job Title: Reason for Leaving? Check appropriate box:  Employer: Address: Supervisor's Name & Title:  Employed: From: Job Duties:		□ Full Time	☐ Part Time  City  Phone Number:  May we contact this Salary/Hourly Rate:	State	Seasonal  Zip  Yes / No	
Job Duties:  Job Title:  Reason for Leaving?  Check appropriate box:  Employer:  Address:  Supervisor's Name & Title:  Employed:  From:  Job Duties:  Job Title:		□ Full Time	☐ Part Time  City  Phone Number:  May we contact this Salary/Hourly Rate:	State	Seasonal  Zip  Yes / No	
Job Duties: Job Title: Reason for Leaving? Check appropriate box:  Employer: Address: Supervisor's Name & Title:  Employed: From: Job Duties:		□ Full Time	☐ Part Time  City  Phone Number:  May we contact this Salary/Hourly Rate:	State	Seasonal  Zip  Yes / No	

# Consent to perform Criminal History Background Check

	am an applicant for employment with the City of Tolar and have bee part of the application process, the City of Tolar conducts a criminal history background check. I do hereby consent any information provided during the application process in performing the criminal history check.	
decisio	ity has informed me that I have the right to review and challenge any negative information that would adversely impa on to offer employment. In addition, I have been informed that I will have a reasonable opportunity to clear up any mation reported within a reasonable time frame established with the sole discretion of the City.	ict a istaken
1.	Have you ever been convicted or plead guilty before in a county of any federal, state or municipal criminal offense? If yes, explain.	Yes / No
2.	Have you ever received deferred adjudication or similar disposition for any federal, state or municipal criminal offense? If yes, explain.	Yes / No
3.	Have you ever received probation or community supervision for any federal, stae or municipal criminal offense? If yes, explain.	Yes / No
4.	Are you currently on probation? If yes, explain.	Yes / No
5. 6.	Have you ever been convicted of any criminal offense in a county outside the jurisdiction of the United States? If yes, explain.	Yes / No
List of	ther names if different than name on the front of application (i.e. maiden, divorce, legally changed, etc.)	
I unde	licant's Statement erstand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will to (1) eliminate me from further consideration for employment, or (2) may result in my immediate termination from the e, whenever it is discovered.	be sufficient e employer's
related	orize the City of Tolar to investigate my personal history and/or employment record and to contact any and all references to obtain a information about me. In consideration for the City's acceptance of my application, I release from liability the City of Tolar, its yees, and all other persons, from claims and damages in connection with furnishing such information.	dditional job officials and
and/or law en	rstand that all potential employees are subject to a drug screen, physical examination and criminal background check in addition personal reference checks. I understand that the employment process may include a review of my driving record which is on file wit forcement agencies. I also agree that if I an employed in a job requiring the operation of a motor vehicle, my failure to maintain agreeord may result in my discharge.	h appropriate
I also u	understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States an ration laws require me to complete an I-9 for in this regard.	d that federal
to me, establis	rstand that nothing contained in this employment application or in the granting of an interview is intended to create an employment the City of Tolar and myself for either employment, or for the providing of any benefit. No promises regarding employment have am I understand that no such promise or guarantee is binding upon the City of Tolar unless made in writing. If an employment r shed, I understand that I have the right to terminate my employment at any time and that the City of Tolar retains the same right is an equal opportunity employer.	ve been made elationship is
	received, read and understand the job description associated with the position for which I am applying.	
	by that I have read, fully understand and accept all terms of the Applicant Statement.	
	cure of Applicant:Date:	
Retur	n applications to: City of Tolar, P. O. Box 100 Tolar Texas 76476	