

City of El Dorado Application for Employment

GENERAL INFORMATION

Name (Last)	(First)	(Middle Initial)	Home Telephone () -
Address (Mailing Address)	(City)	(State)	(Zip)
E-Mail Address	Are you legally entitled to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		

POSITION INFORMATION

Position or Type of Employment Desired	Will Accept: <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary	Salary Desired:
Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date Available:

WORK EXPERIENCE (Most Recent First)

Employer	Telephone Number () -	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties:		Last Salary
		Supervisor
Reason For Leaving		May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Telephone Number () -	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties:		Last Salary
		Supervisor
Reason For Leaving		May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Telephone Number () -	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties:		Last Salary
		Supervisor
Reason For Leaving		May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

EDUCATION AND TRAINING

Level	Name and Location of School	Degree Earned	Major
High School/GED			
College			
Vocational/Business			
Military Service	Branch	Date of Entry	Date and Type of Discharge
Specialized training, course work, licenses, or certifications received which you feel better qualify you for the position for which you are applying. Include all pertinent skills and equipment that you can operate			

REQUIRED QUESTION

Have you ever been convicted of a felony Yes No (If yes, please provide date (s) and details)
 Information regarding conviction record will not necessarily bar an applicant from employment; individual circumstances will be considered relative to the job sought

PROFESSIONAL REFERENCES

List name and telephone number of at least three business/work references that are not related to you. If not applicable, list three school or personal references that are not related to you.

Name	Years Known	Relationship and title
Company	Home Phone ()	Work Phone ()
Name	Years Known	Relationship and title
Company	Home Phone ()	Work Phone ()
Name	Years Known	Relationship and title
Company	Home Phone ()	Work Phone ()

Do you have any friends or relatives currently working for the City of El Dorado Yes No (Please provide names)

Applicant Statement

I expressly authorize the City of El Dorado, its representatives, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me. I understand that this employer does not unlawfully discriminate in employment and no questions on the application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state and federal law.

If I am hired, I understand that I am free to resign at any time, with or without notice and with or without cause and that the employer reserves the same right to terminate my employment with or without notice and with or without cause, except as required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the City Manager. 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 (1) eliminate me from further consideration for employment, or (2) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the Applicant statement.

Signature of applicant _____ Date _____