

CITY OF MADISONVILLE
210 WEST COTTONWOOD PHONE 936-348-2748
MADISONVILLE, TEXAS 77864
FAX # 936-348-3815

EMPLOYMENT APPLICATION

EQUAL OPPORTUNITY EMPLOYER M/F/D

The Age Discrimination in Employment Act of 1967 forbids discrimination against persons over the age 40

ALL QUESTIONS MUST BE ANSWERED

Name	Drivers License #
Street Address	Social Security #
City, State & Zip Code	Phone #
All Applicants for employment must be at least 18 Can you submit proof of age after employment? _____	Position Desire _____
Has bond ever been refused?	Background if any:
Have you ever been convicted of a felony?	If so, please give details:
Are you related by blood or marriage to any employee, or former employee of the City? _____ Referred By:	If "yes" state name relationship & employee: _____ If you are not an American Citizen, do you you have a visa which permits you to work in this country? ____ Yes ____ No ____
Location preferences, if any:	

EDUCATION

	Name/School	Major Subject	No of Yrs. Completed	Graduated? Degree?
High School	_____			
College	_____			
Graduate School	_____			
Other Trade/Business School	_____			
Describe any Honors/Awards	_____			
Other (Trade/Business School)	_____			
Other Course Work Applicable	_____			

U.S. MILITARY SERVICE

Years served	Branch of Service	Rank at Discharge	Duties
Are you a member of the National Guard or Reserve? _____ Yes _____ No _____			

EMPLOYMENT HISTORY

1. Present or last employer: _____ Phone No. _____
Address _____ Date Started: _____ Date Left: _____
Immediate Supervisor _____ Their Title _____ Your Title: _____
Annual Salary at Start: _____ Annual Salary on Leaving _____ Reason for Leaving: _____
Your duties: _____

2. Previous employer: _____
Address: _____ Phone No. _____
Immediate Supervisor _____ Date Started: _____ Date Left: _____
Annual Salary at Start: _____ Annual Salary on Leaving _____ Reason for Leaving: _____
Your duties: _____

MACHINES OPERATED

Please Identify by Type/Model

Typewriter _____ Terminals _____ Typing _____ wpm
Word Processor _____ Microcomputer _____ Shorthand _____ wpm
Transcriber _____ Other _____ Date Entry _____
Calculator _____ Touch __ Yes __ No Date Processing Computers _____
Backhoe _____ Dump Truck _____ Chipper _____
Slope Mower _____ Sewer Machine _____ Maintainer _____

Date Available: _____ Starting Salary Desired: _____
In case of emergency, call: _____ Phone #: _____

PRE-EMPLOYMENT STATEMENT

I authorize the City of Madisonville to make any inquiries they desire regarding my education, employment, ability, habits and personal character for the purpose of determining my fitness for employment. I also authorize previous employers, or any other person to whom the City of Madisonville may refer, to give any and all information regarding my employment or scholastic record together with any information, personal or otherwise, and I hereby release such persons, and any companies which they represent, from all liability or any damages whatsoever in connection with their compliance. I understand that misrepresentation or omission of any fact or circumstance called for in this application which would affect my application unfavorably, or receipt of unsatisfactory references, will be sufficient cause for termination without liability to me/or salary as may have been earned at the time of my termination.

Date: _____ Applicant's Signature: _____