



# City of Tucker

## Employment Application

The City of Tucker is **An Equal Opportunity Employer** and complies with all EEO laws.

<b>Personal Data</b>			
Name (Last, First, Middle)		Nickname	Email Address
Date of Application			
Current Street Address		City	State
Zip			
Current Mailing Address (if different from above)		City	State
Zip			
Telephone Numbers			
Work/Day:		Home/Evening:	Cell:
Are you legally eligible to work in the U.S.? (Proof of identity and legal right to work will be required upon employment.)			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
If you are not a U.S. citizen, do you have the legal right to remain in the U.S.?			
<input type="checkbox"/> Permanently <input type="checkbox"/> Temporarily			
Have you ever been known by any other name(s)?		If yes, please list:	Are you related to any Employee working here.?
<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No Name
Have you ever previously applied to work here?		If yes, complete the following:	
<input type="checkbox"/> Yes <input type="checkbox"/> No		Approximate Date	Location
			Results
<b>Work Preference</b>			
Type of Position Desired		Salary Requirements	
		\$ per	
Date Available for Work		Work Location/Geographic Preference	
		1 <sup>st</sup> 2 <sup>nd</sup>	
Type of Employment Desired			
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Intern <input type="checkbox"/> Co-Op <input type="checkbox"/> Other:			
<b>Employment History</b>			
<b>Please list your job history for the past seven (7) years in chronological order. You may attach a resume, but complete this application as well. (Applicant may include in such history any verified work performed on a temporary, cooperative, summer and/or volunteer work).</b>			
Present or Most Recent Employer		Type of Business	Telephone Number
Dates of Employment		From: To:	
Address (Street Number, City, State and Zip)		Starting Base Salary	
		\$ per:	
Job Title		Supervisor Name and Title	Final Base Salary
			\$ per:
Reason for Leaving		Describe Your Responsibilities	
		or <input type="checkbox"/> See Attached Resume	
May we contact this company?		If no, may we contact upon your acceptance of our employment offer?	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No Contact Name:	

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<b>Employment History Continued</b>			
Previous Employer	Type of Business	Telephone Number	Dates of Employment From:                      To:
Address (Street Number, City, State and Zip)		Starting Base Salary \$                      per:	
Job Title	Supervisor Name and Title	Final Base Salary \$                      per:	
Reason for Leaving		Describe Your Responsibilities <div style="text-align: right;">Or <input type="checkbox"/> See Attached Resume</div>	
May we contact this company? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, may we contact upon your acceptance of our employment offer? <input type="checkbox"/> Yes <input type="checkbox"/> No                      Contact Name:	
Previous Employer	Type of Business	Telephone Number	Dates of Employment From:                      To:
Address (Street Number, City, State and Zip)		Starting Base Salary \$                      Per:	
Job Title	Supervisor Name and Title	Final Base Salary \$                      Per:	
Reason for leaving		Describe Your Responsibilities <div style="text-align: right;">Or <input type="checkbox"/> See Attached Resume</div>	
May we contact this company? <input type="checkbox"/> Yes <input type="checkbox"/> No		If no, may we contact upon your acceptance of our employment offer? <input type="checkbox"/> Yes <input type="checkbox"/> No                      Contact Name:	
Previous Employer (including address)	Dates of Employment From:                      To:	Telephone Number	Reason for Leaving
Previous Employer (including address)	Dates of Employment From:                      To:	Telephone Number	Reason for Leaving
Previous Employer (including address)	Dates of Employment From:                      To:	Telephone Number	Reason for Leaving
Previous Employer (including address)	Dates of Employment From:                      To:	Telephone Number	Reason for Leaving
<b>Military Experience (Do not include ROTC)</b> Be sure to include any special/technical training (show dates and names of schools)			
Branch of Service	Dates of Service From:                      To:	Rank at Discharge	Occupational Specialization
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**References** Please list three people best qualified to comment on your qualifications and related experience.

Name	Relationship	Address	Telephone Number
Name	Relationship	Address	Telephone Number
Name	Relationship	Address	Telephone Number

**Education**

Name and address of high school(s), college(s) or other schooling (include street, city, state and zip).	Dates of Attendance	Years Completed	Major Studies/Degree(s)
	From:                  To:	From:                  To:	
	From:                  To:	From:                  To:	
	From:                  To:	From:                  To:	

**Scholastic Record (College Only)**

Undergraduate cumulative overall grade point average:	On a Scale of A = Points	Rank in Class <input type="checkbox"/> Top 10% <input type="checkbox"/> 1 <sup>st</sup> Qtr. <input type="checkbox"/> 2 <sup>nd</sup> Qtr. <input type="checkbox"/> 3 <sup>rd</sup> Qtr. <input type="checkbox"/> 4 <sup>th</sup> Qtr.			
Undergraduate grade point average in major field:	On a Scale of A = Points	Graduate cumulative overall grade point average:	On a Scale of A = Points		

**Activities**

List school, campus, professional and/or community activities. Include any office(s) held. (If you wish, you may omit any organization or activity, the name of which indicates the race, sex, color, religion or national origin of its members.)

Name of Organization/Activity	Role/Position	Duties/Accomplishments	Dates (Include Month and Year)

List current licenses, special training or skills you would like considered; e.g., CPA, CFP, etc.

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<b>Additional Information:</b> The fact that you are awaiting trial or have a record of conviction will not necessarily bar you from employment.		
Are any felony charges against you currently pending? (Pending charges will not necessarily bar you from employment.) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you been convicted of a felony in the past 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please state the date and disposition.	Do you currently use illegal drugs? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever taken money or articles of value from an employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please explain.		
<b>Referral Information:</b> What source referred you to us?		
<input type="checkbox"/> Advertisement <input type="checkbox"/> Agency <input type="checkbox"/> Company Web Site <input type="checkbox"/> Temporary/Contractor Conversion <input type="checkbox"/> Employee Referral (Name) _____, Relationship _____ <input type="checkbox"/> Internet Job Board: _____		

**As An Applicant You Agree To And Understand The Following:**

1. You must provide proof of identity and authorization to work in the U.S. as required by the Immigration Reform and Control Act of 1986.
2. You will be required to meet the minimum age requirements of applicable laws.
3. The Company may conduct a drug test and investigations, including MVR, driver's license, criminal records, credit history, verification of prior employment history, professional certifications and education. By signing this application I hereby grant permission to any person, firm, or corporation to release to the Company or its representative any and all information regarding my past work or employment, and background. I waive any and all claims I might have with respect to the providing of such information.
4. I certify that the information provided in this Application is accurate. I understand that the withholding of information or the giving of false information on this application will result in a refusal to hire or in disciplinary action up to and including the termination of my employment.
5. I understand that nothing in this Application or in the Company's personnel guidelines, handbooks, policies or procedures is intended to create, or does create, an employment contract between the Company and me. I further understand and agree that if I am offered employment by the Company it will be on an at-will basis. This means that either the Company or I may terminate the employment relationship at any time for any reason, with or without cause. I understand and agree that only the Company President can enter into an agreement on any other terms and she can only do so in writing signed by her and the employee in question. Finally, I understand and agree that this constitutes the entire agreement between the Company and me with regard to this subject.
6. If you have signed an employment agreement, confidentiality agreement or any other document with a prior employer that might restrict your activities if hired by this organization, you must disclose this fact before a job offer is made. Failure to disclose such information is grounds for termination of your employment.

**I have read and understand the above.**

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name: \_\_\_\_\_