

APPLICATION FOR EMPLOYMENT

City of Eufaula
Personnel Department
P. O. Box 219
Eufaula, Alabama 36072-0219
Phone (334) 688-2000 Fax (334) 688-2016

(Please Print)

Position(s) Applied For: _____		Date of Application ___/___/___	
How Did You Learn About Us?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk In	
<input type="checkbox"/> Website	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	
Last Name _____		First Name _____	Middle Initial _____
Address: _____		City _____	State _____ Zip Code _____
Home Phone Number (____) _____ - _____		Cell Phone Number (____) _____ - _____	
E-Mail Address: _____			
Have you ever filed an application with us before?		___ yes ___ no	
		If Yes, give date: ___/___/___	
Have you ever been employed with us before?		___ yes ___ no	
		If Yes, give date: ___/___/___	
Are you currently employed?		___ yes ___ no	
May we contact your present employer?		___ yes ___ no	
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?		___ yes ___ no	
<i>Proof of citizenship or Immigration status will be required upon employment.</i>			
<i>We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age disability, marital or veteran status, sexual orientation, or any other legally protected status.</i>			
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On what date would you be available for work?

Date: ___/___/___

Are you available to work: ___ Full Time ___ Part Time ___ Shift Work ___ Temporary

Are you currently on "lay-off" status and subject to recall? ___ yes ___ no

Can you travel if a job requires it? ___ yes ___ no

Have you been convicted of a felony within the last 7 years? ___ yes ___ no
Conviction will not necessarily disqualify an applicant from employment

If Yes, please explain: _____

Education

	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
Elementary School	_____	_____	_____	_____
High School	_____	_____	_____	_____
Undergraduate School	_____	_____	_____	_____
Graduate Professional	_____	_____	_____	_____
Other (Specify)	_____	_____	_____	_____

Indicate any foreign languages you can speak, read, and /or write

	Fluent	Good	Fair
Speak	_____	_____	_____
Read	_____	_____	_____
Write	_____	_____	_____

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.

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Describe any job-related training received in the United States military.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

	Dates Employed		
	From	To	
Employer: _____	_____	_____	Work Performed
Address: _____	Hourly Rate/Salary		_____
Telephone Number(s): _____	Starting	Final	_____
Job Title: _____	_____	_____	_____
Supervisor: _____			_____
Reason For Leaving: _____			_____
_____			_____

	Dates Employed		
	From	To	
Employer: _____	_____	_____	Work Performed
Address: _____	Hourly Rate/Salary		_____
Telephone Number(s): _____	Starting	Final	_____
Job Title: _____	_____	_____	_____
Supervisor: _____			_____
Reason For Leaving: _____			_____
_____			_____

	Dates Employed		
	From	To	
Employer: _____	_____	_____	Work Performed
Address: _____	Hourly Rate/Salary		_____
Telephone Number(s): _____	Starting	Final	_____
Job Title: _____	_____	_____	_____
Supervisor: _____			_____
Reason For Leaving: _____			_____
_____			_____

List professional, trade, business, or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status:

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Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills

Check Skills/Equipment Operated

Calculator
 Switchboard
 FAX

Computer:
 Excel
 Word
 Power Point

Heavy Equipment:
 Backhoe
 Bulldozer
 Knuckleboom
 Household Trash Truck Compactor

Do you have a CDL license? Yes No If yes, Class A or Class B ?

State any additional information you feel may be helpful to us in considering your application.

If your prior employment was in a DOT position, have you tested positive on a pre-employment drug/alcohol screening? yes no

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