APPLICATION FOR EMPLOYMENT

CITY OF RAYMONDVILLE

142 South 7th Street Raymondville, Texas 78580-2591 (956) 689-2443



Website: raymondvilletx.us

Fill out application form completely. If questions are not applicable, enter "NA". Do not leave questions blank. Be sure to sign when completed. The City of Raymondville is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services.

Position applying for:		How did you learn about us? □ Advertisement □ Friend □ Inquiry □ Other						
PERSONAL DATA								
Name (last, first, middle)								
Street Address and/or Mailing Address		City			State	Zip		
Daytime Telephone	Work Telephone Number			Do you have a current valid Driver's License? State Attach copy				
Date you can start work	Salary Desired			Do you have a High School Diploma or GED? Yes ☐ No ☐				
POSITION INFORMATION Check all t	POSITION INFORMATION Check all that you are willing to work							
Hours Full Time	Graveyard [Status Regular				
Are you authorized to work in the U.S. on an unrest	tricted basis?			Ye	es 🗆	No 🗆		
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No If yes, explain								
Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job? Yes								
School N				Address/City/State				
School								
School								
Other								
SPECIAL SKILLS List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc.)								
REFERENCES Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.								
Name	Address/City/	Address/City/State			Phone	Relationship		

WORK HISTORY Start with your present or most recent employ	ment and work b	ack. Use separate sheet if necessary	(INCLUDE PAID AND UNPAID POSITIONS)				
Job Title #1	Start Date (mo/day/yr)		End Date (mo/day/ут)				
Company Name	Supervisor's Name		Phone Number				
City	State		Zip				
Duties:							
Reason for Leaving	Starting Salary		Ending Salary				
May we contact your present employer? Yes □ No □ N/A □							
Job Title #2	Start Date (mo.	/day/yr)	End Date (mo/day/yr)				
Company Name	Supervisor's N	ame	Phone Number				
City	State		Zip				
Duties:							
Reason for Leaving		Starting Salary	Ending Salary				
Job Title #3	Start Date (mo/day/yr)		End Date (mo/day/yr)				
Company Name	Supervisor's N	ame	Phone Number				
City	State	,	Zip				
Duties:							
Reason for Leaving		Starting Salary	Ending Salary				
Job Title #4	Start Date (mo/day/yr)		End Date (mo/day/yr)				
Company Name	Supervisor's Name		Phone Number				
City	State		Zip				
Duties:							
Reason for Leaving		Starting Salary	Ending Salary				
I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application. I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause,							

Date

with or without notice to the other party.

Applicant Signature