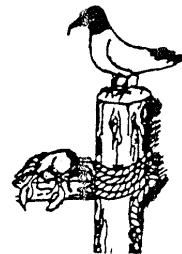




CITY OF SEADRIFT

POST OFFICE BOX 159
SEADRIFT, TEXAS 77983
(361) 785-2251
FAX (361) 785-2208



Application for Employment

POSITION(S) APPLIED FOR _____ DATE OF APPLICATION ____/____/____

NAME _____

(LAST) (FIRST) (MIDDLE)

ADDRESS _____

STREET CITY STATE ZIP

TELEPHONE (____) _____ - _____ SOCIAL SECURITY NUMBER _____ - _____ - _____

If you are under 18, can you furnish a work permit? YES NO

Have you ever been employed here before? YES NO

Are you legally eligible for employment in this country? YES NO

(Proof of U.S. citizenship or immigration status will be required upon employment)

Date available for work ____/____/____

Type of employment desired Full-Time Part-Time Temporary Seasonal Education Co-Op

Have you been convicted of a felony in the last seven (7) years? YES NO

(Such conviction may be relevant if job-related, but does not bar you from employment)

If yes, please explain _____

Driver's license number (If required by job) _____ State _____

EMPLOYMENT HISTORY List your last four (4) employers, assignments, or volunteer activities, starting with the most recent, including military experience.

FROM	TO	EMPLOYER	TELEPHONE (____)____ - ____
JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary Start \$_____ per _____ Final \$_____ per _____	
FROM	TO	EMPLOYER	TELEPHONE (____)____ - ____
JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary Start \$_____ per _____ Final \$_____ per _____	
FROM	TO	EMPLOYER	TELEPHONE (____)____ - ____
JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary Start \$_____ per _____ Final \$_____ per _____	

SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience that may qualify you for work with our company.

EDUCATIONAL BACKGROUND

Name and Location	YEARS COMPLETED	DID YOU GRADUATE?		COURSE OF STUDY
		MAJOR	DEGREE	
HIGHSCHOOL				
COLLEGE				
OTHER				

REFERENCES (NO FAMILY/RELATIVES)

NAME	TELEPHONE	RELATION	YEARS KNOWN
	() -		
	() -		
	() -		

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer’s service if I have been employed. Furthermore, I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information.

Signature of Applicant _____ Date ___ / ___ / ___