

Gun Barrel City, Texas

1716 W. Main Street
 Gun Barrel City, TX 75156
 (903) 887-1087 Fax (903) 887-6666



An Equal Opportunity Employer

It is the policy of the City of Gun Barrel City not to discriminate in its employment and personnel practices because of a person's race, color, creed, sex, national origin, age, disability, marital status, veteran's status, sexual orientation, political opinions or affiliation.

Please print. Your application will not be considered unless all questions are answered.

Date: _____

Position Desired (Please check the department you are interested in and list desired position)

Police Department	Fire Department	Street Department	Municipal Court	Code Enforcement
Animal Control	Administration	Open	Other	

Do you desire full or part-time work?		What days/hours are you available for work?	
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Name:

Last

First

Middle Initial

Address:

Street

City

State

Zip Code

Contact Numbers:	Home	Work	Cell	Fax
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Social Security Number: _____ Are you at least 18 years of age? _____

Drivers State and License No: _____ Type: _____ Class: _____ Exp. Date: _____

Person to be notified in case of an emergency: _____

Name

Relationship

Address

Telephone

1. Have you applied for employment with the City of Gun Barrel City before? _____ If "Yes," when? _____
2. Have you ever been employed by the City of Gun Barrel City? _____ If "Yes," when? _____
3. Are you lawfully authorized to be employed in the United States _____ for any employer _____ or for your current Employer only?
4. Have you ever been discharged or asked to resign due to unsatisfactory conduct or performance? _____
5. Have you ever been convicted of a crime? Are you presently under charges for a felony or misdemeanor? Have you ever been on probation? _____ If you answered "Yes," please explain _____

(A "Yes" answer will not necessarily disqualify you from employment. Your case will be considered in relation to the requirements of the job.)

6. Are you or any members or your family related to any member of the Gun Barrel City Council or to any City of Gun Barrel City employee? _____ If "Yes," please provide the following information:

7.

Name	Relationship	Job Title

8. Have you served in the Armed Forces or National Guard of the United States? _____
 Branch: _____ Dates of Service: _____ Rank at Discharge: _____

Specific training and duties: _____

EMPLOYMENT EXPERIENCE

List all jobs beginning with your current or most recent employer. Account for all periods of employment and military service. You may attach a resume, certificate, discharge papers, letters of recommendation or any other documents as part of your employment.

CURRENT / PREVIOUS EMPLOYER:			
Start Date:		Ending Date:	
Starting Salary:		Ending Salary:	
Job Title:			
Description of Duties			
Reason for Leaving:			
Mailing Address:			
Supervisor's Name:		Title	
May we contact?		Telephone Number:	

PREVIOUS EMPLOYER:			
Start Date:		Ending Date:	
Starting Salary:		Ending Salary:	
Job Title:			
Description of Duties			
Reason for Leaving:			
Mailing Address:			
Supervisor's Name:		Title	
May we contact?		Telephone Number:	
PREVIOUS EMPLOYER:			
Start Date:		Ending Date:	
Starting Salary:		Ending Salary:	
Job Title:			
Description of Duties			
Reason for Leaving:			
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Job Title:			
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May we contact?		Telephone Number:	
PREVIOUS EMPLOYER:			
Start Date:		Ending Date:	
Starting Salary:		Ending Salary:	
Job Title:			
Description of Duties			
Reason for Leaving:			
Mailing Address:			
Supervisor's Name:		Title	
May we contact?		Telephone Number:	

EDUCATION

High School Attended: _____ Dates of Attendance: _____

City and State: _____

Did You Graduate? _____ If "No," Last Grade Completed: _____ or Date GED Earned: _____

College / Vocational School Name and City/State	Dates Attended	Area of Study	Certificate Received	Date Received

ADDITIONAL INFORMATION

Please list your professional or technical licenses, registrations, certificates or memberships. (IMPORTANT: If the position you are applying for requires a specific license or certificate - you MUST attach a copy to this application)

Please list office, manufacturing, and/or construction equipment and machines you operate: _____

Please list computer software / hardware that you are currently using - or have used in the past: _____

Please summarize any additional special skills, training or qualifications you possess that may relate to the position you are applying for:

REFERENCES

Please provide the following information for three individuals, excluding relatives, who have knowledge of your character, experience and/or professional abilities:

Name	Occupation / Job Title	Telephone Number

ACKNOWLEDGEMENT

REVIEW YOUR ANSWERS CAREFULLY AND READ THE STATEMENT BELOW BEFORE SIGNING.

The answers I have provided on this application are full and accurate to the best of my knowledge and subject to validation by the City of Gun Barrel City. I understand that any material misrepresentation or deliberate omission of a fact in my application may be justification for refusal of employment or, if hired, termination of my employment with the City of Gun Barrel City.

I expressly request former employers and other persons or institutions who may have information concerning me to furnish such information to the City of Gun Barrel City officials, and agree to hold such employers, persons, and institutions harmless, and I do hereby release them from any and all liability for damages of any nature whatsoever for furnishing such information. Furthermore, I understand the City of Gun Barrel City will not be liable and I hereby hold the City of Gun Barrel City harmless, and I do hereby release them from any and all liability for damages of any nature whatsoever which may result from requesting and/or receiving such information.

Signature

Date

Printed Name: _____

PLEASE SIGN THE FOLLOWING PAGE IN THE PRESENCE OF A NOTARY.

FOR OFFICE USE ONLY

Interview Scheduled? _____ Date and Time Scheduled: _____

If an interview was not scheduled, indicate reason:

- _____ Incomplete application
- _____ Withheld and/or False Information on Application
- _____ Driver's License is invalid
- _____ Nepotism
- _____ Uninsurable under City Insurance due to driving record
- _____ Does not meet required minimum qualifications for the position.
- _____ Other: _____

Signature: _____ Date: _____

Title: _____

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Confidential Information Agreement

A thorough investigation will be conducted to determine your qualifications for the position for which you are applying. To a great extent, your employment will depend on confidential information obtained from persons with whom you have been associated. Therefore, such information is confidential and the City of Gun Barrel City cannot reveal the reason of rejection for those applicants who are not accepted.

If the reasons for your non-acceptance are of a temporary nature, whereby you could be accepted at a later date, you will be so notified.

I, _____, have read and fully understand the above statements.

(Printed Name)

Signature

Date

Personal Inquiry Waiver

I hereby authorize all Federal, State, County and Local Governments, present and former employers, physicians, military branches, personal references, present and former family members, and schools I attended to furnish to the City of Gun Barrel City, Texas any and all information regarding me in consideration of my suitability for employment. I hereby hold harmless and release from any liability any person, company or institution furnishing this information.

Printed Name: _____

Signature: _____

Date: _____

STATE OF _____

COUNTY OF _____

Sworn and subscribed to before me on this _____ day of _____, _____.

Notary Public