

CITY OF LAMESA

Application for Employment 601 S 1st Lamesa, Texas 79331 Phone 806-872-2124 Fax 806-872-4341

(For City use Only)	
Date received	
Time Received	
Received by	

Visit us on the Web at www.ci.lamesa.tx.us

Important:

These instructions must be followed exactly. Fill out application form completely. If questions are not applicable, enter "N/A" **Do not leave questions blank**. Be sure to sign when completed. City of Lamesa is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sexual orientation, gender identity, sex, religion, age or disability in employment or the provision of services. You may make copies of the application and enter different position title, <u>but each copy must be signed</u>. Resumes will not be accepted in lieu of applications.

POSITION DESIRED		DATE		
NAME				
(LAST NAME)	(First Name)		(Middle)	
Mailing Address:Name	Street or Avenue	City	State	Zip
List any other names used if	different from name giv	en on application:		·
Telephone No: Home ()	Cell ()	E-Mail		
Do you have relatives employe	d by the City of Lamesa?	Yes □ No □ Depar	tment:	
Their Name(s):		Relationship		
Have you been interviewed by	the City previously? Yes	□ No □		
When What I	Position?	By Whom?		
Check all types of work you wil	l accept: Full Time □ S	Seasonal/Temporary □	Part Time □	
When will you be able to report	for work?	Minimum salary	requirement	
Are you a U.S. Citizen? Ye	s □ No □			
If not, provide alien registration	number:		9	
Current Driver's License #(Sta		Commercia	I Driver's License Yes	s 🗆 No 🗆

(04/2021)

Have you been convicted adjudication for a Class A Have you ever been conditional adjudication on a felon	A or B mison	emeanor in the last	10 years pred	eding the dat	te of application?	Yes □ No □
Yes □ No □ f your answer is "Yes" explained in detail on a separate page giving dates and nature of the offense, name and location che court, disposition of the cases (s). A conviction may not disqualify you, but a false statement will.						
		EDUCAT	ION & TR	AINING		
High School or G.E.D		(City/State)			(Last Grade	completed)
College/University:(I	_ocation)	(Sem. Hrs.)	(Ma	ajor)	(Type of Degree	·)
following: License/Certification PE, R.N., Attorney, CPA, etc.		Date Issued Is		Issued by/Location of issuing authority (State or other Authority) (City & State)		License Number
SPECIAL TRAINING: L qualifications. List cours	e, date, an		ng military traii		•	
COURS	E TITLE		DATE		GRANTIN	G INSTITUTION
SPECIAL SKILLS/QUAI experience. Also, if appl					s acquired from e	mployment or other

(04/2021)

Do you speak a languag If yes, what language(s)		required for this position) Yes No Good Excellent				
EMPLOYMENT HISTORY						
EMPLOYMENT RECORD - organizations names which	Start with your present or indicate race, color, religion	most recent, include military service assignments and volunteer activities including on, sex, national origin, or disability. Must include full and complete employmen				
	s applicable. Explain brea	aks in employment, including unemployment benefits. Attach additional pages i				
May we contact your p	present employer? Yes	s 🗆 No 🗆				
Employer		Telephone () Dates Employed: position) Yes Per Hour □ Week □ Year □				
Job little		Dates Employed: position) Yes				
Salary: Starting \$	Final \$	Per Hour □ Week □ Year □				
Supervisor						
vvorked Performed						
keason for leaving						
Employer		Telephone (
Job Title		Dates Employed: position) Yes				
Salary: Starting \$	Final \$	Telephone () Dates Employed: position) Yes Per Hour Week Year				
Supervisor		roi riodi di vvoor di rodi di				
Worked Performed						
Reason for leaving	8					
Employer		Telephone ()				
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Salary: Starting \$	Final \$	Per Hour 🗆 Week 🗆 Year 🗆				
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vvorked Performed						
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Job Title Salary: Starting \$	Final C	Dates Employed: position) Yes				
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Reason for leaving						
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Morked Performed						
Reason for leaving						
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Employer Job Title		Telephone ()				
Job Title		Dates Employed: position) Yes				
Salary: Starting \$	Final \$	Per Hour 🗆 Week 🗆 Year 🗀				
Supervisor						
vvorked Periornied						
Reason for leaving						

(04/2021)

GENERAL INFORMATION

READ CAREFULLY BEFORE SIGNING

I hereby certify that the statements made and answers given by me to the foregoing and following questions are true and correct and that there are no omissions of any kind whatsoever. I agree that any evasion, untruthful statement, answer or omission shall be sufficient cause for discharge at any time. I authorize the City of conduct a background regarding my employment history and any additional information necessary to determine suitability for City employment. I further acknowledge that my employment may be terminated, and any offer of employment if such is made, may be withdrawn with or without cause, at the option of the City or myself. I further acknowledge that the foregoing completed application form does not in any way constitute an offer of employment.

	<u> </u>
Signature of Applicant	Date Signed

The City of Lamesa is an equal opportunity employer and does not discriminate on the basis of race, creed, color, sexual orientation, national origin, gender, gender identity, religion or disability.

CITY OF LAMESA ACKNOWLEDGEMENT

I understand this application is not an offer of employment. I also understand that if I am hired, my employment with the City of Lamesa will be "AT WILL."

I also understand that nothing contained in this application or in the granting of an interview creates a contract between the City of Lamesa and myself, either for employment or for providing of benefits.

I further understand that should I be offered employment, the offer is contingent on successful completion of any applicable physical and drug screening as permitted by the Americans with Disabilities Act and/or other applicable law.

I hereby authorize the City of Lamesa to investigate all facts contained in my application for employment. I also authorize the release of any and all information by my present and past employers, wherever located, which may be required for a reference check. I further authorize all of my previous employers and current employer to give any and all information concerning my employment and any other pertinent information which said employers may have personal or otherwise, and I release all parties from all liabilities for any damages which may result from the furnishing of said information.

I agree that a telephonic facsimile or photographic copy of this document shall be as valid as the original.

/ <u>L.</u>	· OILE
(Signature of Applicant)	

APPLICANT'S SIGNATURE:

CITY OF LAMESA AUTHORIZATION FOR BACKGROUND INFORMATION

I hereby authorize, without reservation, the City of Lamesa to investigate, now and during my employment with the City, if applicable, my past employment, education, and activities. I similarly authorize the City to request and receive any information concerning me, including but not limited to criminal history, consumer reports, credit reports, and public records, from any persons, entities, schools, companies, corporations, partnerships, associations, credit bureaus, consumer reporting agencies, state agencies, departments of labor, law enforcement agencies, licensing agencies, and from my previous employers.

I further release, discharge, and hold harmless the City of Lamesa, Texas and all of its agents, any person, law enforcement agencies, schools, or personal/business entities and their respective officers, directors, employees, representatives, and agents of any kind from any and all claims, liability, damages, and responsibility of whatever kind or nature, arising out of or in connection with any act or omission in any such investigation or compliance with this authorization and request to release information, or any attempt to comply with it.

I have voluntarily signed this release to assist in the evaluation of my employment qualification. I understand and agree that this means that a background investigation may be conducted by the City of Lamesa prior to being offered a position.

I agree that if any investigation reveals that I provided false information to or omitted information from the City of Lamesa (including, but limited to, my application, resume, or interview), then the application process may be halted, any offer of employment may be withdrawn, or if employed, disciplinary action may occur, including termination of employment with the City of Lamesa.

The City will comply with the FCRA if and when obtaining a consumer report.

I agree that a telephonic, facsimile, o	or photographic copy of this release shall be as valid as the original.	
I,	hereby authorize and accept these terms and conditions, on this the	
(Signature of Applicant or Employee)	_	