

CITY OF HUMBLE

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination based on race, creed, color, gender, age, national origin, handicap, veteran status or any other legally protected status.

Date Received:

Time Received:

Received By:

Sent to Dept:

PLEASE INDICATE POSITION APPLYING FOR HERE: _____

LAST NAME	First	MIDDLE	DATE
STREET ADDRESS			HOME TELEPHONE
CITY, STATE, ZIP			BUSINESS TELEPHONE
EMAIL:			CELL/OTHER PHONE NUMBER:
SOCIAL SECURITY NUMBER:			SALARY EXPECTED: \$ _____ per _____
CHECK ALL TYPES WORK YOU WILL ACCEPT: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> TEMPORARY			WILL YOU WORK OVERTIME IF ASKED: <input type="checkbox"/> YES <input type="checkbox"/> NO
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? <input type="checkbox"/> YES <input type="checkbox"/> NO			WHEN WILL YOU BE AVAILABLE TO BEGIN WORK?
HAVE YOU EVER BEEN CONVICTED OF ANY CRIMES IN THE PAST, EXCLUDING MISDEMEANORS AND SUMMARY OFFENSES, WHICH HAVE NOT BEEN ANNULLED, EXPUNGED OR SEALED BY A COURT? (A CONVICTION IS NOT AN AUTOMATIC BAR TO EMPLOYMENT AND WILL BE A FACTOR IN THE EMPLOYMENT DECISION ONLY IF THE CRIME IS RELEVANT TO THE POSITION FOR WHICH YOU ARE APPLYING.) <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DESCRIBE IN FULL: _____ _____			HAVE YOU EVER BEEN BONDED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, WITH WHAT EMPLOYERS? _____ _____

EDUCATION, TRAINING AND SKILLS

DO YOU HAVE A HIGH SCHOOL DIPLOMA? <input type="checkbox"/> YES <input type="checkbox"/> NO	DO YOU HAVE A G.E.D.? <input type="checkbox"/> YES <input type="checkbox"/> NO	DIPLOMA OR G.E.D. CERTIFICATE RECEIVED FROM: _____		
COLLEGE, POST GRADUATE, TECHNICAL, OR VOCATIONAL SCHOOL: CITY/STATE: _____				
Name	Location	Course of Study	Years Completed	Degree Received
Describe any other specialized training, apprenticeships, etc.				

Applicant's Name: _____
Position Applying for: _____

List any foreign language(s) and check the box that best describes your skill level:				
Language:	Read and Write	Read and Speak	Read only:	Speak only:

SKILLS:
The following space is provided for other information concerning special training, interests, career goals, or any other data you wish to provide:

Software Proficiency	<input type="checkbox"/> Microsoft Word Version if known, _____ <input type="checkbox"/> Other Word Processing program, specify: _____ <input type="checkbox"/> Excel , Version if known, _____ <input type="checkbox"/> Desktop Publishing, specify _____ <input type="checkbox"/> Other Software, specify _____ <input type="checkbox"/> Microsoft Office Version if known, _____
Equipment:	<input type="checkbox"/> Standard Business copier(s) <input type="checkbox"/> Calculator/ 10 Key (by touch) <input type="checkbox"/> Other Equipment, specify _____ <input type="checkbox"/> Typing, words per minute _____
Other job related skills: _____ _____	

EMPLOYMENT HISTORY
Beginning with the most recent, list all employment for the past ten (10) years. ALL APPLICABLE BLANKS MUST BE COMPLETED.
RESUMES MAY NOT BE SUBMITTED IN PLACE OF EMPLOYMENT HISTORY, but may be attached as a supplement to your application.

If any employment was under a different name, indicate name:

Employer:	Phone:
Position held:	Employment dates:
Address:	City/State/Zip:
Supervisor Name:	Salary: \$ _____ per
Type of Business:	May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Brief description of duties:	

Reason for leaving:

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Employer:	Phone:
Position held:	Employment dates:
Address:	City/State/Zip:
Supervisor Name:	Salary: \$ _____ per
Type of Business:	May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Brief description of duties:	
Reason for leaving:	

We may contact the employers listed above unless you indicate those you do not want us to contact.

DO NOT CONTACT:

Employer Name and Number:	Reason:
Employer Name and Number:	Reason:

Applicant's Name: _____
Position Applying For: _____

Employer Name and Number:	Reason:
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MILITARY	Did you serve in the U. S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "yes", in which Branch?
	Describe any training received relevant to the position for which you are applying:	

PERSONAL REFERENCES

List three people whom you have known for at least three years – Do not include relatives or former employers

Full Name:	Relationship:
Address:	Phone Number:
City, State, Zip Code	
How long have you known this person:	Alt. Phone:
Full Name:	Relationship:
Address:	Phone Number:
City, State, Zip Code	
How long have you known this person:	Alt. Phone:
Full Name:	Relationship:
Address:	Phone Number:
City, State, Zip Code	
How long have you known this person:	Alt. Phone:

<p>Additional Information</p> <p>Membership in professional and civic organizations, special accomplishments, awards, etc. (Exclude those which may disclose your race, color, religion, age or national origin)</p>

OTHER

How did you learn of this job opening?

<input type="checkbox"/> Newspaper Ad	Which newspaper:	<input type="checkbox"/> Website	<input type="checkbox"/> City Employee	<input type="checkbox"/> Walk-in
<input type="checkbox"/> Other:				

IF YOU ARE HIRED BY THE CITY OF HUMBLE, YOU WILL BE REQUIRED TO ATTEST TO YOUR IDENTITY AND EMPLOYMENT ELIGIBILITY, AND TO PRESENT DOCUMENTS CONFIRMING YOUR IDENTITY AND EMPLOYMENT ELIGIBILITY. YOU CANNOT BE HIRED IF YOU CANNOT COMPLY WITH THESE REQUIREMENTS.

AUTHORIZATION

PLEASE READ CAREFULLY BEFORE SIGNING!

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the City of Humble.

I understand that any employment is conditioned on a background check. I authorize the City of Humble, by signing the accompanying release form(s), to thoroughly investigate all statements contained in my application or resume, and I authorize my former employer(s) and references to disclose information regarding my former employment, character and general reputation to the City, without giving me prior notice of such disclosure. In addition, I release the City, any former employer(s) and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation of disclosure.

I understand and agree that nothing contained in this application, or conveyed during my interview if one is held, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice and/or at the option of either myself or the City of Humble. No promises regarding employment have been made to me, and I understand that no such promise or

Applicant's Name: _____
 Position Applying For: _____

guarantee is binding upon the City of Humble unless made in writing and signed by all parties concerned.

If employed, I also agree to submit to a medical examination and drug test if required before starting work. If employed, I also agree to submit to a medical examination or drug test AT ANY TIME DEEMED APPROPRIATE by the City of Humble and permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the City the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug testing, and if I am hired, a condition of my employment will be that I abide by the City's Drug and Alcohol Policy.

I understand that filling out this form does not obligate the City to hire. If hired, I agree to abide by all City work rules, policies and procedures. The City retains the right to revise its policies and/or procedures, in whole or in part, at any time.

DATE: _____

Signature: _____

THE CITY OF HUMBLE IS AN AT-WILL-EMPLOYER AND ONLY ACCEPTS APPLICATIONS FOR POSITIONS THAT ARE CURRENTLY POSTED. APPLICATIONS WILL BE REVIEWED BY HUMAN RESOURCES BEFORE FORWARDING TO THE HIRING DEPARTMENT. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. THE HIRING DEPARTMENT WILL CONTACT THE SELECTED APPLICANTS FOR INTERVIEWS. ONLY APPLICANTS SELECTED FOR INTERVIEWS WILL BE CONTACTED.

THANK YOU FOR YOUR INTEREST IN EMPLOYMENT WITH THE CITY OF HUMBLE, TEXAS.

**INVITATION TO SELF-IDENTIFY
EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION DATA**

City of Humble is an Equal Opportunity/Affirmative Action Employer, and as such, is required by federal law to maintain and report certain information regarding its employees.

In order to comply with the law(s), you are invited to provide the following information voluntarily. This information will remain CONFIDENTIAL and will be used only for purposes allowed by law. Refusal to provide such information will not subject you to any adverse treatment, nor will it become part of your personnel file. When reported to the government, this data will not identify any specific individual. Thank you for your cooperation.

Name: _____ Application Date: _____

Position Applied for: _____

Gender: Male Female

Race/Ethnicity: American Indian/Alaskan Native
 Asian
 Black or African-American
 Hispanic or Latino
 White
 Native Hawaiian or other Pacific Islander
 Two or more races

How did you hear about this job ad? _____

We sincerely thank you for your voluntary submission of this information. No further follow-up on your part is required.

Equal Opportunity Employer, M/F/D/V

To be completed by employer:

EEO-1 Category: Officials and managers Craft Workers
 Professionals Operatives – semi-skilled
 Technicians Laborers and Helpers
 Sales Service Workers
 Administrative Support Workers

Employer information completed by: _____ Date _____

Applicant's Name: _____
Position Applying For: _____