



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, but each copy must be signed. 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 given on application: _____

Telephone No: Home () _____ Cell () _____ E-Mail _____ @ _____

Do you have relatives employed by the City of Lamesa? Yes No Department: _____

Their Name(s): _____ Relationship _____

Have you been interviewed by the City previously? Yes No

When _____ What Position? _____ By Whom? _____

Check all types of work you will accept: Full Time Seasonal/Temporary Part Time

When will you be able to report for work? _____ Minimum salary requirement _____

Are you a U.S. Citizen? Yes No

If not, provide alien registration number: _____

Current Driver's License # _____ Commercial Driver's License Yes No
(State) (Number)

Have you been convicted of a **MISDEMEANOR** or placed on deferred prosecution, pretrial diversion or deferred adjudication for a Class A or B misdemeanor in the last 10 years preceding the date of application? Yes No

Have you ever been convicted of a FELONY or placed on deferred prosecution, pretrial diversion or deferred adjudication on a felony charge?

Yes No

If your answer is "Yes" explained in detail on a separate page giving dates and nature of the offense, name and location of the court, disposition of the cases (s). A conviction may not disqualify you, but a false statement will.

EDUCATION & TRAINING

High School or G.E.D. _____
(City/State) (Last Grade completed)

College/University: _____
(Location) (Sem. Hrs.) (Major) (Type of Degree)

If a license, certificate or other authorization is required/related to position for which you are applying, complete the following:

License/Certification Attorney, CPA, etc.	PE, R.N.,	Date Issued	Issued by/Location of issuing authority (State or other Authority) (City & State)	License Number

SPECIAL TRAINING: List Any special training program or courses you have attended which you feel may add to your qualifications. List course, date, and institution (including military training).

COURSE TITLE	DATE	GRANTING INSTITUTION

SPECIAL SKILLS/QUALIFICATIONS: Summarize special skills and qualifications acquired from employment or other experience. Also, if applicable, indicate number of people you have supervised.

Do you speak a language other than English? (If required for this position) Yes No

If yes, what language(s) do you speak? _____ How fluently? Fair Good Excellent

EMPLOYMENT HISTORY

EMPLOYMENT RECORD – Start with your present or most recent, include military service assignments and volunteer activities including organizations names which indicate race, color, religion, sex, national origin, or disability. Must include full and complete employment history for **last 15 years** as applicable. Explain breaks in employment, including unemployment benefits. Attach additional pages if necessary. **This section must be completed.**

May we contact your present employer? Yes No

Employer _____ Telephone (_____) _____
Job Title _____ Dates Employed: position) Yes _____
Salary: Starting \$ _____ Final \$ _____ Per Hour Week Year
Supervisor _____
Worked Performed _____
Reason for leaving _____

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Job Title _____ Dates Employed: position) Yes _____
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Supervisor _____
Worked Performed _____
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Job Title _____ Dates Employed: position) Yes _____
Salary: Starting \$ _____ Final \$ _____ Per Hour Week Year
Supervisor _____
Worked Performed _____
Reason for leaving _____

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.

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.

APPLICANT'S SIGNATURE:

(Signature of Applicant)

**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, 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 _____ day of _____, 20 _____.

(Signature of Applicant or Employee)