LETTER OF APPLICATION BY A CURRENT EMPLOYEE

Employee's Name:	
Current Position:	Current Salary:
Immediate Supervisor (Name and Title):	
Position Applied For Including Department Name:_	
Job Announcement Date:	_Closing Date:

Reason for Interest in this Position:

Knowledge, Skills, Abilities, Licenses, Education, Training, etc., Attained since Initial Employment with this Employer:

(Attach standard application for employment.)

Employee's Signature

Date

** TEAR OFF THIS SHEET AND KEEP FOR YOUR INFORMATION ** <u>City of Live Oak</u>

INSTRUCTIONS FOR COMPLETING APPLICATION FOR EMPLOYMENT

<u>PLEASE READ FIRST</u>: Thank you for your interest in employment with the City of Live Oak. Before completing your application, read the instructions below and take note of the conditions for employment listed under the instructions.

- 1. New vacancies may be posted on the City web site, public bulletin boards, newspapers and other publications.
- 2. Each position listed in our job openings includes minimum qualifications. Applicants not meeting the minimum qualifications listed for a position will not be considered for employment.
- 3. Applications for employment are not accepted for positions that are not currently posted.
- 4. Each job posting includes a brief job description. A full job description may be requested from the Human Resource Manager. *Answer all questions completely* and accurately. If a question does not apply to you, please mark it "NA." *Incomplete applications will not be considered.* All answers are subject to verification.
- 5. If you are applying for more than one position at the same time, leave the position for which you are applying blank until copies are made for each position.
- 6. A resume may be submitted along with an application, but not in lieu of one. If a resume is attached, all questions on the application must still be answered completely. Do not use the comment "See Resume" on the application. Copies of other job related documents such as certificates, diplomas, or letters of recommendation may also be attached.
- 7. Please type or write legibly in black ink.

CONDITIONS OF EMPLOYMENT

- 1. It is the applicant's responsibility to ensure that the City of Live Oak Human Resources Department receives the application(s) for employment.
- 2. Some positions require assessment testing. Minimum testing requirements must be achieved for the application to be considered for employment. Applications will only be considered if specific testing requirements, experience, and educational requirements are achieved.
- 3. All college education requires verification through a certified transcript. Please be prepared to provide the certified transcript at the time of the initial interview.
- 4. Applications for employment are reviewed by the hiring supervisor(s). <u>Unsuccessful</u> applicants are notified when a positions filled.
- 5. Any applicant who receives a contingent job offer will be given a pre-employment physical, which includes a drug screen.
- 6. Applicants who have been convicted of a felony in the last ten (10) years or who are currently on probation, deferred adjudication, or parole will not be considered for employment. Finalists for any position are subject to a background investigation.

Deliver, Mail or Fax Application(s) for Employment to: CITY OF LIVE OAK, HUMAN RESOURCES DEPARTMENT 8001 Shin Oak Drive Live Oak, TX 78233 Telephone: 210-653-9140, ext. 201 Fax: 210-653-0015

APPLICATION FOR EMPLOYMENT

An Equal Opportunity/Affirmative Action Employer

If you need assistance in completing the employment application, please inquire at the Human Resource Department. Furthermore, this employer conducts pre-employment qualification testing and personal interviews in the application process. If you believe you will require reasonable accommodation (e.g., interpreter, TDD, scheduling adjustments) for pre-employment testing or a personal interview, you must notify the Human Resource Department at least 24 hours prior to the scheduled test or interview.

PERSONAL DATA

(Last Name)	(First Name)		(Initial)	
(Street Address, RFD, or P.O. Box)					
(City)	(State)			(Zip Code)	
Phone Number: ()	E	E-Mail address			
Cell Number: ()					
DL#	State:		Type:	Expires:	
Position(s) Applied For:					
When would you be available to start work?					
Check each type of work you will accept:	Regular	Temporary	Part time	D Full time	
Have you filed an application here before? \Box	Yes 🗖 No	If yes, c	late:		
Have you ever been employed here before? \Box	Yes 🗖 No	If yes, dat	e(s):		
Are you or your spouse related to any officer or	employee of this em	ployer?	Yes 🗖 No		
Minimum Acceptable Salary: \$		per	(e.	.g., per week, month, year,	etc.)

EDUCATION AND TRAINING:

Name of Schools Attended and Location	Dates Attended From To	Average Grades	Major Field	Degree Received

SKILLS:

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

Computer:	IBM-PC, wpm	Software Proficiency:	WordPerfect, Version
	Macintosh, wpm	[Word, Version
	Other computer, specify:	ſ	Other word processor, specify:
Equipment:	Standard Business Copier(s)	ſ	Lotus 1-2-3, Version
	Calculator (by touch)	C	Excel, Version
	Photography Equipment specify:	ſ	Other spreadsheet, specify:
	PBX or other Switchboard	Ĺ	Database, specify:
	Other Equipment, specify:	C	Desktop Publishing, specify:
		ſ	Other Software, specify:

EMPLOYMENT EXPERIENCE:

List each position held. Start with your present or most recent assignment and work backward. If you need additional space, please continue on separate sheet(s) of paper. In the column at the right, describe your assignments. Attach additional sheets as necessary. Resume may be submitted to supplement this information, but the information below must be completed for this application to be considered.

May inquiry be made of your present employer?

Tyes No

Employer:	Address:		Dates: From To		
Job Title:	Summary of Job Duties:		Supe	Supervisor:	
Reason for Leaving:		Starting Salary:		Ending Salary:	
Employer:	Address:		Dates: From To		
Job Title:	Summary of Job Duties:		Supe	Supervisor:	
Reason for Leaving:		Starting Salary:		Ending Salary:	
Employer:	Address:		Dates: From To		
Job Title:	Summary of Job Duties:		Supervisor:		
Reason for Leaving:		Starting Salary:		Ending Salary:	
Employer:	Address:		Date	s: From To	
Job Title:	Summary of Job Duties:		Supe	rvisor:	
Reason for Leaving:		Starting Salary:		Ending Salary:	

List any training	, special s	skills or	qualifications	not listed	above:
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ADDITIONAL INFORM By law, you must be authorized t		er to be employed by this employer.	If you are one of the following,
please check this box: \Box			
	ed for permanent residence.	Service to work indefinitely in the Un	ited States.
Have you ever been convicted of a	a felony or other crime? \Box Ye	es 🗖 No	
applying requires the operation o	f a motor vehicle. Conviction wi	ctions for minor traffic violations unle ll not result in your automatic disqu the crime to this position will be cons	alification for employment. The
If the position for which you are a	pplying requires operating a motor	vehicle, do you have a valid Texas dr	river's license?
Tyes No			
If yes, type of license:	tor Commercial, Type	Chauffeur	
List all states of which you hold a	• •		
-			
REFERENCES:			
List three persons not related to yo	bu who are qualified to describe you	ur capabilities for the position you see	ek.
Name	Address	Phone	Occupation

I hereby authorize this employer to review and obtain my employment records from all of the employers listed above.

I certify that the statements and information contained herein are true, complete, and correct to the best of my knowledge, and I authorize any former employer to release to this employer or its authorized representative any and all employment records and other information it may have about my employment. I understand that the information will be used for the purpose of evaluating my application for employment and that I am responsible for providing legal documents verifying my identity and eligibility for employment in accordance with the Immigration Reform Act of 1986 (IRCA). In addition, I understand that, if selected for an interview, true copies of all degrees, certificates, or licenses listed on this application will be required before an employment decision can be made. A photocopy of this authorization shall be as valid as the original.

I understand and agree that any offer of employment will be contingent upon my satisfactorily passing a drug and alcohol test. Further, I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time, and that intentional misrepresentation on my application or during the interview process will subject me to immediate discharge. I understand that my employment is contingent upon the satisfactory completion of verification of information contained in this application, a background check which may include reference checks, criminal history and driving record verification, etc.

Signature of Applicant: _____

Date:_____

Printed Name: _____

EEO STATISTICAL DATA FORM

Dear Applicant:

Our commitment to a policy of providing equal employment opportunities to all applicants without regard to race, color, disability, religion, age, sex, or national origin requires that certain information on all job applicants be gathered and maintained for statistical purposes only. Completion of this form is voluntary on your part and will not affect your opportunities for employment with us. However, to help fulfill our commitment, we would appreciate your supplying the information requested below.

<u>PLEASE NOTE</u>: The information requested on this form will be used for <u>statistical reporting purposes only</u>. It will be separated from your application form and will not be used in any way in evaluating your qualifications for employment, nor will it become a part of your personnel file if you are hired.

INSTRUCTIONS:

Please check the box corresponding to the correct response(s) in each of the categories below:

SEX: Male Female A	GE (in years): \square Under 40 \square 40 and above
RACIAL/ETHNIC GROUP Caucasian (Not of Hispanic Origin)	SOURCE OF INFORMATION ABOUT APPLYING Posted job announcement
Black (Not of Hispanic Origin)	Texas Employment Commission
HispanicAsian or Pacific Islander	Current employeeFriend
American Indian or Alaskan Native	Professional publicationNewspaper
	 Just walked in Other (Specify)

DISABILITY

Do you have a disability? Yes No

Disability is described as:

- 1. physical or mental impairment which substantially limits a major life activity;
- 2. previous record of such an impairment; or
- 3. being regarded as having such an impairment.



Applicant statement and release

I certify that the information provided in my application for employment with the City of Live Oak, Texas is true and complete to the best of my knowledge. I authorize the investigation of all matters contained in this application and hereby give the Employer permission to contact schools, previous employers, references, and others. I hereby release the Employer from any liability as the result of such contact. I understand that misrepresentations, omissions of fact or incomplete information provided on my application or resume may remove me from further consideration for employment. In addition, if I am employed, I understand that any misrepresentations or omissions of fact on my application or resume may subject me to discipline, up to and including discharge, at any time without any previous notice.

Applicant Signature:_____

Applicant Name (please print):_____