

CITY OF NASH, TEXAS

Employment Application



Date of Application: _____

A LITTLE INFORMATION ABOUT YOU.....					
Last Name	First	M.I.	Date		
Street Address			Apartment/Unit #		
City		State		ZIP	
Phone	Cell <input type="checkbox"/> Work <input type="checkbox"/>	E-mail Address			
Seconday Phone	Cell <input type="checkbox"/> Work <input type="checkbox"/> Other <input type="checkbox"/>			Minumun salary / wage expected:	
Social Security Number:	available to start:				
Position (s) you are applying for:					
Are you seeking : <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time		Are you willing to work: Weekends: <input type="checkbox"/> YES <input type="checkbox"/> NO Holidays: <input type="checkbox"/> YES <input type="checkbox"/> NO Overtime: <input type="checkbox"/> YES <input type="checkbox"/> NO			
What days/hours are you available to work:					
Are you at least 18 years old: YES <input type="checkbox"/> NO <input type="checkbox"/>					
Have you ever applied with the City of Nash before: YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, when (approximate mo/yr): _____					
Have you ever worked for the City of Nash before: YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, when: _____ Title: _____					
Were you referred by a current Nash Employee: YES <input type="checkbox"/> NO <input type="checkbox"/> If Yes, whom: _____					
If not by a Nash Employee referral, how did you find out about us: <input type="checkbox"/> Newspaper <input type="checkbox"/> City Website <input type="checkbox"/> Other _____					
Only US Citizens or Aliens who have a legal right to work in the US are eligible for employment. Can you, upon employment, provide genuine documentation establishing your identity and eligibility to be legally employed in the United States: <input type="checkbox"/> YES <input type="checkbox"/> NO					
Are you related to or a close friend of a City of Nash employee. <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, please list name and relationship: _____					
EDUCATION					
Check the highest level of education attained:					
Elementary: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 Secondary: <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/> GED College: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+					
Name of High School Attended:		Location:			
Did you receive a diploma: YES <input type="checkbox"/> NO <input type="checkbox"/>		If no, are you currently attending High School: YES <input type="checkbox"/> NO <input type="checkbox"/>			
Please List degree(s) and any major(s)/minor(s) achieved:					
Name of Trade/Business/Other School:			Location:		
Field of Study:					
List any name(s) used while attending College or a University that is different than on this application:					

SKILLS AND EXPERIENCE (Please list any special qualifications, training, education, skills or experience that you feel warrant consideration by the City of Nash.)

BACKGROUND (A conviction record will not necessarily be a bar to employment and factors such as age and time of offense, seriousness and nature of the violation and rehabilitation will be taken into account. In answering the questions in this section, you are not required to, nor should you, respond with any convictions which have been expunged, or convictions in cases wherein the records have been sealed.)

Have you ever been convicted of, or plead guilty or Nolo Contendere (no contest), to any crime other than a minor traffic violation?
 NOTE: A DUI or DWI is NOT a minor traffic violation: YES NO

Please describe all convictions. Include type of crime(s), date of conviction(s) and whether the offense(s) was a misdemeanor or felony:

Are you now under indictment for any crime for which you have been charged but have not been convicted: YES NO

DRIVER'S LICENSE (Complete this section if the job you are applying for requires driving or operating mobile equipment.)

Driver's License Number: _____ State Issued: _____ Expiration Date: _____

BOND COVERAGE (Bond Coverage is used to manage exposures, such as employee dishonesty, fraudulent acts, and other risks.)

Have you ever had any bond coverage modified, revoked or declined: YES NO

ESSENTIAL JOB FUNCTIONS

The Americans with Disability Act prohibits discrimination against qualified individuals with a disability, a record of a disability, or a perceived disability. There are a variety of essential functions of the job that will be required to perform. Are you able to perform all functions of the position you are applying for with or without a reasonable accommodation: YES NO

Please describe which tasks, if any, you will need an accommodation to perform, and explain what type of accommodation you will need. (If you have any questions regarding the functions of the position please ask the interviewer before answering this question.):

Previous Employment – (List in order, Most recent or present employer should be listed first.)

1. Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Briefly describe duties:			
From	To	Reason for Leaving	
2. Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Briefly describe duties:			

From	To	Reason for Leaving	
3. Company			Phone
Address			Supervisor
Job Title	Starting Salary	\$	Ending Salary \$
Briefly describe duties:			
From	To	Reason for Leaving	
May we contact all of the above employers for a reference: <input type="checkbox"/> YES <input type="checkbox"/> NO			
If No, tell us which employers not to contact and why: _____			
Are you currently Employed: <input type="checkbox"/> YES <input type="checkbox"/> NO			
If yes, why are you considering leaving: _____			
Have you ever been discharged or asked to resign from any position: <input type="checkbox"/> YES <input type="checkbox"/> NO			
If Yes, please describe the reason: _____			
Why are you seeking a new position at this time:			
Have you missed work or school within the last year other than approved vacation, sick or disability leave:			
If Yes, how many days _____ Please describe: _____			
Consistent attendance and punctuality are essential requirements of every job at the City of Nash. Is there anything which would interfere with your regular attendance and punctuality if you are offered a job with the City of Nash: <input type="checkbox"/> YES <input type="checkbox"/> NO			
If Yes, please explain: _____			
DISCLOSURE AND RELEASE			
<p>In connection with my application for employment with the City of Nash, I understand that consumer reports which may contain public record information may be requested. These reports may include the following type of information: names and dates if employment, reason for termination of employment, work experience, etc. I further understand that such records may contain public record information concerning my driving record, credit, bankruptcy proceedings, criminal records, etc., from federal, state and other agencies which maintain such records.</p> <p>I have the right, upon written request, to receive a written description of the nature and scope of the investigation requested and a written summary of my rights under the Fair Credit Reporting Act.</p> <p>I authorize, without reservation, any person or entity contacted by the City of Nash or its agent or agents to furnish the above-stated information, and I release any such person or entity from any liability for furnishing such information.</p>			
Signature: _____		Date: _____	
DISCLAIMER AND SIGNATURE			

The City of Nash does not discriminate in hiring on basis of race, color, religion, sex, national origin, disability, age or any other characteristic protected by law. This application does not intend to ask questions that would provide information that could be used for discrimination.

By signing your name below, you give the City of Nash the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. You certify that all answers given are true, accurate and complete. You understand that the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment regardless of when or how discovered.

You also authorize the City of Nash to conduct a background investigation, which may or may not include contacting past employers regarding your employment and reason for leaving. You authorize the City of Nash to conduct criminal history and bond coverage inquiries. By signing below, you hereby release from liability the City of Nash and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

Completing an application does not imply that you will be offered employment. You understand that nothing contained in this application or any information gained or discussed during the interview process creates an employment contract between you and the City of Nash. You understand that if you are employed, such employment is for an indefinite period of time and the City of Nash may change wages, benefits, and conditions at any time. **You understand that your employment is at will. No individual with the City of Nash is authorized to change the employment-at-will status.**

Questions regarding this statement should be directed to the City Secretary of City of Nash before signing.

To submit this application for employment, the original application and any supplemental information must be mailed or presented in-person to the following address:

In-Person: Nash City Hall
119 Elm Street
Nash, TX 75569

Mailed: Nash City Hall
P. O. Box 520
Nash, TX 75569

Only completed and accurate applicataions will be considered.

Signature : _____ **Date :** _____

City of Nash Fire Department

Certification / Authorization Form



Please sign the following lines to indicate you have read and agree to each paragraph.

I certify that the facts set forth in my membership application are true and complete to the best of my knowledge. I understand that any false or misleading information given in my application or interview(s) may result in my termination at any time.

Signature of Applicant: _____ Date: _____
(MM/DD/YYYY)

I understand that if this application is accepted, I will be required to complete a six month mandatory probation period, during which time my membership may be terminated for violations of rules and procedures or failure to meet certain minimum standards set forth by the department.

Signature of Applicant: _____ Date: _____
(MM/DD/YYYY)

I authorize the City of Nash, Texas to conduct a pre-employment investigation of my personal information to include a criminal background and driving history. I also agree to comply with drug testing if requested either before or during employment. I understand that my membership may be terminated depending upon the results of background or drug tests, and that failure to comply with drug testing will be treated the same as a positive test result.

Social Security Number: _____ - _____ - _____ Date of Birth: _____
(MM/DD/YYYY)

Ethnicity: American Indian / Alaska Native Asian Black / African American
 Hispanic Native Hawaiian / Pacific Islander White / Caucasian

Height: _____ ' _____ Weight: _____ Lbs Hair Color: _____ Eye Color: _____
FEET INCHES