

Application for Employment

Pre-Employment Questionnaire Equal Opportunity Employer

Personal Information

Date: _____

Name (Last, First Middle)		Social Security Number ____	
Present Address	City	State	Zip Code
Permanent Address	City	State	Zip Code
Phone No.	Secondary Phone No	Referred By	

Employment Desired

Position	Date You Can Start	Salary Desired
Are you currently employed? Yes <input type="checkbox"/> No <input type="checkbox"/>	If so, may we inquire of your present employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you legally authorized to work in the U.S.? Yes <input type="checkbox"/> No <input type="checkbox"/>
Ever applied to this company before? Yes <input type="checkbox"/> No <input type="checkbox"/>	Where?	When?

Education History

Name & Location of School	Years Attended	Did You Graduate	Subjects Studied
High School			
College			
Trade, Business or Correspondence School			

General Information

Subject of Special Study/Research Work	
Special Training	
Special Skills	
U.S. Military or Naval Service	Rank

Application for Employment Continued on Other Side

Former Employers (List Below Last Four Employers, Starting With Last One First)

Date Month and Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

References (Give Below The Names of Three Persons, Not Related To You, Whom You Have Known At Least One Year)

Name	Address	Business	Years Known

Authorization

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from any liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter in to any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does no permit the release or use of disability related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

Date

Signature

Date

Interviewed By

**FOR INTERVIEWER USE ONLY
APPLICANT SHOULD NOT WRITE ON THIS PAGE**

Remarks

Personality	Character
Ability	

Approved:

Employment Manager

Department Head

General Manager

City of Carbon Hill
Carbon Hill, AL 35549

Authorization to Conduct Background Check

I, _____, authorize the City of Carbon Hill to conduct a background check for any criminal records that may pertain to me. For employment purposes, the City may also conduct a credit check, driver's license check, reference check and previous employment check during my background investigation. I am also aware that the information listed below has nothing to do with hiring practices, but that it is necessary to conduct a background check through the NCIC/FBI computer and the driver's history section of my application for employment. I further certify that I will not hold the City of Carbon Hill or its employee(s) liable in any way in connection with this investigation.

Applicant Signature

Date

The following will be use used for NCIC/Driver's License check only and has no connection with employment.

Driver's License Number: _____

Issuing State: _____

Race: _____ Sex: _____

DOB: _____

SSN: _____ (Required for NCIC records check)

If you have not held an Alabama Driver's License for five years and have/had a license from another state, please fill out the following:

Driver's License Number: _____

Issuing State: _____