APPLICATION FOR EMPLOYMENT

The City of Martin is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability or any other characteristic protected by law.

INTRODUCTORY INFORMATION:

Date: _____ Name: Address: _____ State: _____ Zip: _____ City: Phone: **APPLICANT QUESTIONS:** _____ Salary desired: _____ Date Available: Type of worked desired: If hired, can you provide documents required to establish your eligibility to work in the U.S.? __ Yes __ No __ Yes __ No Are you 16 years of age or older? How were you referred to the City of Martin? Have you ever been convicted of, or pled guilty or no contest to, a crime other than a minor traffic violation? __ Yes __ No If yes, please explain in detail on a separate piece of paper and include the date of final disposition of the case and the nature of the offense. This information will not necessarily disqualify you from employment but false or misleading information will. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. **EDUCATION:** High School or last grade completed: Name & Address of School: Course of Study: Number of years completed: Degree/Diploma: College or Technical School Name & Address of School: _____ Number of years completed: Course of Study: Degree/Diploma: Other Schooling or Training Name & Address of School: Course of Study: Number of years completed: Degree/Diploma: **MILITARY EXPERIENCE:** Branch of Service: From: _____ To: Rank/Type of Service: Special Training/Experience:

RECORD OF EMPLOYMENT:

List positions starting	ng with most recent:			
Employer:	Telephone:			
Address:				
Position Title:		Supervisor:		
Start Date:	Date Left:	Beginning Salary:	Ending Salary:	
Duties:				
Employer:	Telephone:			
Address:				
Position Title:	Supervisor:			
D .:	Date Left:		Ending Salary:	
	Telephone:			
		·		
Start Date:	Date Left:	Beginning Salary:	Ending Salary:	
Duties:				
Reason for Leaving	;			
WORK-RELATE	D REFERENCES: (Do no			
Name	Occupation	Years Known Contact In	formation	
1.				
2				
3				
STATEMENT (Plo	ease read this statement c	arefully before signing this applica	ation):	
all data given on thi agents, from any lia	s application and during in bility that might result fron	terviews. I hereby release the City of a such an investigation. I authorize a	•	
I understand that the employment.	e City of Martin may requir	re the successful completion of a dru	g and/or alcohol test as a condition of	
employment, I mus	st submit a new application	for a period of 90 days; after that ton. I certify that all the statements r willful omission shall be sufficien	in this completed application are it cause for dismissal or refusal to	
Signature of Appli	cant:	Date Signe	d:	