

Application For Employment – City of Foley, Alabama

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap. The City of Foley is an equal opportunity employer.

(PLEASE PRINT)

Date of Application: _____ Position Applying For: _____

Name _____
LAST FIRST MIDDLE

Address _____
NUMBER STREET CITY STATE ZIP CODE

Telephone (_____) _____ Social Security # _____
Area Code Please provide the best # to reach you

If employed and you are under 18, can you furnish a work permit? Yes No
 Have you filed an application with the city before? Yes No If yes, give date _____
 Have you ever been employed with the city? Yes No If yes, give date _____
 Are you employed now? Yes No May we contact your present employer? Yes No
 Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No (Proof of citizenship or immigration status may be required upon employment)
 On what date would you be available for work? _____
 Are you available to work Full Time Part-Time Shift Work Temporary
 Are you on a lay-off and subject to recall? Yes No
 Have you been convicted of any crime or law violation within the last 7 years? Yes No
 If yes, please explain _____

Are you affiliated with any military unit, such as active reserves or National Guard? Yes No
 If Yes, Branch _____

Are there any reasons that you would not be able to perform the job duties for the position in which you are applying? Yes No

List professional, trade, business or civic activities and offices held. (Exclude those which indicate race, color, religion, sex or national origin): _____

Give name, address and telephone number of three references who are not related to you and are not previous employers.

Education

	ELEMENTARY					HIGH				COLLEGE/UNIVERSITY	GRADUATE/PROFESSIONAL
School Name											
Years Completed: (Circle)	4	5	6	7	8	9	10	11	12		
Diploma/Degree											
Describe Course of Study:											
Describe Specialized Training, Trade or Vocational Training, Police Academy, Fire College or Other.											

State any additional information you feel may be helpful to us in considering your application.

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin.

1 Employer	DATES EMPLOYED		Work Performed
	From	To	
Address			
Job Title	HOURLY RATE/SALARY		
	Starting	Final	
Supervisor			
Reason for Leaving			
2 Employer	DATES EMPLOYED		Work Performed
	From	To	
Address			
Job Title	HOURLY RATE/SALARY		
	Starting	Final	
Supervisor			
Reason for Leaving			
3 Employer	DATES EMPLOYED		Work Performed
	From	To	
Address			
Job Title	HOURLY RATE/SALARY		
	Starting	Final	
Supervisor			
Reason for Leaving			
4 Employer	DATES EMPLOYED		Work Performed
	From	To	
Address			
Job Title	HOURLY RATE/SALARY		
	Starting	Final	
Supervisor			
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience _____

Is there any job or position of work for the City which you will not accept or perform? Yes No

If yes, please explain: _____

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in my discharge. I understand, also, that I am required to abide by all rules and regulations of the City of Foley.

Signature of Applicant _____ Date _____

I acknowledge that I have been informed as a part of the physical examination which I may be required to have in connection with the application for employment, that there will also be testing for drugs or controlled substances of any kind or nature. I acknowledge that the physician or technician making the test may use such procedure as in their sole opinion is proper.

Signature of Applicant _____ Date _____

I understand that due to Alabama State law, my Application for Employment with the City of Foley (and supporting documents such as resumes) are a matter of public record. I understand that the documents I submit in the employment application process may be released and/or disclosed to the media or other parties upon request.

Signature of Applicant _____ Date _____