City of Elba 200 Buford Street Elba, AL 36323 (334) 897-2333 www.elbaalabama.net



Employment Application *An Equal Opportunity Employer*

Date: _____

| Full Name: | | | | Date: | | | | | | |
|---|------------|----------|---|-----------------------------|---|--|--|--|--|--|
| Last | Firs | t | M.I. | | _ | | | | | |
| Address: | | | | | | | | | | |
| Street Address | | | | Apartment/Unit # | | | | | | |
| | | | | | | | | | | |
| City | | | State | ZIP Code | | | | | | |
| Phone: | | | Email | | | | | | | |
| Phone: | | | Email | | | | | | | |
| Date of birth (mm/dd) | Driver | 's Licer | nse Number: | State: | | | | | | |
| | | | | | | | | | | |
| Position Applied for: | | | | | | | | | | |
| Date Available: Socia | l Security | v No.: | Desired | Desired Salary:\$ | | | | | | |
| | | | | , . | | | | | | |
| Check all that apply: Full time: | Pa | rt Time | : Seasonal | Temporary | | | | | | |
| | | | | | | | | | | |
| Are you a citizen of the United States? | YES | NO | If no, are you authorized to wo | YES NO Ork in the U.S.? | | | | | | |
| , | YES | | | | | | | | | |
| Will you work overtime, if requested? | | NO | Will you travel, if required? | YES NO | | | | | | |
| Have you ever been employed with the City? | | NO | | | | | | | | |
| | | | If yes, when? | | | | | | | |
| Are any of your relatives employed by the | YES | МО | 16 a.ab.a.0 | | | | | | | |
| City? | | | If so, who? | | _ | | | | | |
| | _ | Conv | rictions | | | | | | | |
| Have you ever been convicted of a felony? | | ŀ | lave you ever been convicted of | | | | | | | |
| | | | vithin the past five years, or were nisdemeanor, which occurred mo | | | | | | | |
| YES NO □ □ | | | YES [| NO | | | | | | |
| If you to either of the above questions, place | oo ovole | in in de | tail and include data(a) of convic | tion. This information will | | | | | | |
| If yes to either of the above questions, please explain in detail and include date(s) of conviction. This information will not necessarily disqualify you as an applicant for employment: | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | _ | | | | | |

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| Date: | | | |
|-------|--|--|--|
| | | | |

| | Work History – List Cur | rent or M | ost Rece | nt First |
|-------------------------|---|-------------------|-------------|------------------------------|
| ۸ ما ما مورد . | | | | Phone: |
| | Starting S | | | Supervisor: Ending Salary:\$ |
| | Starting S | | | Enailing Galaxy. |
| _ | To: | | | |
| May we contact your | previous supervisor for a reference? | YES | NO | |
| Company: | | | | Phone: |
| Address: | | | | Supervisor: |
| Job Title: | Starting S | Salary: \$ | | Ending Salary: |
| Responsibilities: | | | | |
| From: | To: | Reason f | or Leaving: | |
| May we contact your | previous supervisor for a reference? | YES | NO | |
| Company: | | | | Phone: |
| Address: | | | | Supervisor: |
| Job Title: | Starting S | Ending Salary:\$ | | |
| Responsibilities: | | | | |
| From: | To: | Reason f | or Leaving: | |
| May we contact your | previous supervisor for a reference? | YES | NO | |
| List any skills or othe | r qualifications for the position which y | ou feel sho | uld be cons | sidered: |
| | ofessional, or civic organization are younge or disability. List any honors or aw | | | |

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| <u>www.elbaal</u> | abama.net | | | | | Date | · | | | |
|---|-------------------|--------------------|------------------|-----------------|---------------|---------------|------------|------|-----|----|
| | | | Educ | ation | | | | | | |
| Do you have a high | school diploma or | GED? | YES | NO | | Circle the | | | | |
| High School: | | | Address: | | | | | | | |
| From: | To: | _ Did you | ı graduate? | YES | NO | Diploma | : <u> </u> | | | |
| College: | | | Address: | VEC | NO | | | | | |
| From: | To: | _ Did you | ı graduate? | YES | NO | Degree | : | | | |
| Post Graduate School | ols: | | A | ddress:_ YES | NO | | | | | |
| From: Other: | То: | - | ı graduate? A | | | Degree | : | | | |
| From: | То: | | ı graduate? | YES | NO | Degree | : | | | |
| | | _ | Military | Servic | e | _ | | | | _ |
| Were you in the U.S. (Military experience application) | | ted in the e | | | | n of this | | YES | | NO |
| Branch: | | | | | | From: | | | To: | |
| Rank at Discharge: | | Type of Discharge: | | | | | | | | |
| If other than honorab | le, explain: | | | | | | | | | |
| | | | Refer | ences | | | | | | |
| Please list three pro | fessional referer | nces that v | ve may cor | itact: | | | | | | |
| Full Name: | | | | | | Rel | ationsh | nip: | | |
| Company: | | Phone: | | | | | | | | |
| Address: | | | | | | | | | | |
| Full Name: | Relationship: | | | | | | | | | |
| Company: | | | | | | | Pho | ne: | | |
| Address: | | | | | | | | | | |
| Full Name: | | | | | | Rel | ationsh | nip: | | |
| Company: | | | | | | | Pho | ne: | | |
| Address: | | | | | | | | | | |
| | | Disc | claimer a | nd Sigı | natu <u>r</u> | e | | | | |
| I certify that my ans employment, I unde release. | | d complete | e to the bes | st of my | know | ledge. If thi | | | | |

Signature: