

EMPLOYMENT APPLICATION CITY OF BALLINGER

Position Applying For: _____

Applicant Name: _____

Applicant Address _____ **City** _____

State _____ **Zip** _____ **Phone** _____

eMail _____ **Cell** _____

Desired Salary \$ _____ **Per:** HR/WK/YR (Circle One)

Please list the previous 7 years of employers and contact information below

Previous Employer

	Employer Name	Start Date / /
	Supervisor	End Date / /
	Position	Address
Reason for Leaving		Wage
	Employer Name	Start Date / /
	Supervisor	End Date / /
	Position	Address
Reason for Leaving		Wage
	Employer Name	Start Date / /
	Supervisor	End Date / /
	Position	Address
Reason for Leaving		Wage
Please list any employer(s) we cannot contact:		

Please list your educational experience

Educational Experience

		High School	Start Date / /
		City, State	End Date / /
			Program
Activities			Degree? Yes / No
		Trade / College	Start Date / /
		City, State	End Date / /
			Program
Activities			Degree? Yes / No
		College / Graduate	Start Date / /
		City, State	End Date / /
			Program
Activities			Degree? Yes / No

List any additional education on a separate sheet

Extracurricular Activities

Hobbies

Volunteerism

Military Experience

Job Related Skills

CDL? YES / NO

Why do you want to work for the City of Ballinger?

How did you learn about the opening?

References (Minimum 2)

	Name	Years Known
	Relationship	
	Name	Years Known
	Relationship	
	Name	Years Known
	Relationship	

Free Text Area, Please narrate your ambitions and goals with a career at the City: (INSERT RESUME HERE)

Are you related to any current city elected officials or administration staff?

_____	Name	How Related?
_____	Relationship	
_____	Name	How Related?
_____	Relationship	

Relevant Licenses & Certifications

_____ **Authorized to work?** YES / NO

Arrests / Tickets

List Driving Restrictions:

Date Available

_____ **Hours Available** _____

(Voluntary) Accomodations Needed

VOLUNTARY DISCLOSURES

DL / ID # _____ **SOCIAL:** _____

Race: Cauc-Blk-NatAm-Asn-PacIsI-Oth _____ **Eth:** His-Not His-Oth _____

In case of emergency:

Relationship

Work for the city may include access to sensitive data, and will not disclose unless approved. PLEASE convey ALL safety concerns ASAP!

X _____ / _____ / _____

I certify that all the preceding statements and facts provided are true and complete to the best of my knowledge in good-faith. I agree that any false information provided may be used as justification leading to termination of a position if hired. I authorize the city to collect information and background on my personal history. I understand that I will be required to take a drug test and if I do not pass I will be liable for the costs of the test. I agree if hired to continually maintain a lifestyle of moral character and agree to standard or regular drug testing. I agree to convey appropriate notice on my departure if leaving a position, and that this may forfeit my rights to benefits, accrued leave, and access to City of Ballinger Employee resources.

X _____ / _____ / _____

BELOW TO BE USED BY HR AND INTERVIEWER

Application Reviewer: _____
 Position Considered: _____ Offered? YES / NO ___/___/___
 Qualified? YES / NO HIRED? YES / NO ___/___/___ APP Score _____ of _____ Mcourt []

Interview Notes:

KSA Identifications Aptitudes _____
 Verif Skill _____ Equip Test: YES / NO ___/___/___
 Natural Skills _____

Conditional Offer 1	\$ _____ per	HR / YR	Date	___/___/___	Accept	YES / NO
Counter Offer to 1	\$ _____ per	HR / YR	Date	___/___/___	Accept	YES / NO
Conditional Offer 2	\$ _____ per	HR / YR	Date	___/___/___	Accept	YES / NO
Counter Offer to 2	\$ _____ per	HR / YR	Date	___/___/___	Accept	YES / NO
Final Offer	\$ _____ per	HR / YR	Date	___/___/___	Accept	YES / NO

SSN VERIFIED	YES []	No []	Date	___/___/___
DL VERIFIED	YES []	No []	Date	___/___/___
ID VERIFIED	YES []	No []	Date	___/___/___
REF 1 VERIFIED	YES []	No []	Date	___/___/___
REF 2 VERIFIED	YES []	No []	Date	___/___/___
REF 3 VERIFIED	YES []	No []	Date	___/___/___
EMP VERIFIED	YES []	No []	Date	___/___/___
EMP VERIFIED	YES []	No []	Date	___/___/___
EMP VERIFIED	YES []	No []	Date	___/___/___
EDU PRIMARY VERIFY	YES []	No []	Date	___/___/___
EDU 2NDARY VERIFIED	YES []	No []	Date	___/___/___
DEGREE*S* VERIFIED	YES []	No []	Date	___/___/___

Notes:

APPROVED FOR HIRE

HR Admin

X

URINALYSYS SCHEDULE YES [] No [] ___/___/___ **RESULT** PASS FAIL RETEST

RETEST RESULTS	RETEST LAB	PASS	FAIL	RETEST
ANALYSIS FAIL [] Y [] N	LAB 1 \$ _____	LAB 2 \$ _____	TOTAL \$ _____	