

# APPLICATION FOR EMPLOYMENT

CONCHO VALLEY COUNCIL OF GOVERNMENTS

An Equal Opportunity/Affirmative Action Employer

**PERSONAL DATA**

**For Office Use Only**

(Last Name) (First Name) (Initial)

Action(s) Date(s)

(Street Address, RFD, or P.O. Box)

(City) (State) (Zip Code)

**Phone Numbers:**

( ) \_\_\_\_\_

( ) \_\_\_\_\_

**Position(s) Applied For:** \_\_\_\_\_

When would you be available to start work? \_\_\_\_\_

Check each type of work you will accept:  Full Time  Part Time  Temporary

Have you filed an application here before?  Yes  No Date: \_\_\_\_\_

Have you ever been employed here before?  Yes  No Date: \_\_\_\_\_

Are you or your spouse related to any officer or employee of this employer?  Yes  No Minimum acceptable salary: \$ \_\_\_\_\_ per \_\_\_\_\_

**EDUCATION AND TRAINING:** The following space is provided for other information concerning special training, interests, career goals, or any other data you wish to provide (use back if additional space needed).

Name and Schools Attended and Location	Average Grades	Major Field	Degree Received*

**SKILLS:** The following space is provided for other information concerning special training, interests, career goals, or any other data you wish to provide).

Electric Typewriter, \_\_\_\_\_ wpm

Xerox or other copier

Shorthand, \_\_\_\_\_ wpm

Adding Machine/Calculator (by touch)

Word Processing Equipment (Specify \_\_\_\_\_)

PBX or other Switchboard

Transcribing Machine

Keypunch (Specify \_\_\_\_\_)

Photography Equipment (Specify \_\_\_\_\_)

Computer Software/Hardware

Other: \_\_\_\_\_

(Specify \_\_\_\_\_)

**EMPLOYMENT EXPERIENCE:** List each position held. Start with your present or most recent assignment and work backward. If you need additional space, please continue on separate sheet(s) of paper. In the column at the right, describe your assignments.

May inquiry be made of your present employer?  Yes  No

Employer	From:	To:
	Dates	
Address	Summary of Job Duties	
Job Title		
Supervisor		
Reason for Leaving	Starting Salary:	Ending Salary:
<hr/>		
Employer	From:	To:
	Dates	
Address	Summary of Job Duties	
Job Title		
Supervisor		
Reason for Leaving	Starting Salary:	Ending Salary:
<hr/>		
Employer	From:	To:
	Dates	
Address	Summary of Job Duties	
Job Title		
Supervisor		
Reason for Leaving	Starting Salary:	Ending Salary:
<hr/>		
Employer	From:	To:
	Dates	
Address	Summary of Job Duties	
Job Title		
Supervisor		
Reason for Leaving	Starting Salary:	Ending Salary:

**SUMMERIZE ALL OTHER PREVIOUS EMPLOYMENT:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ADDITIONAL INFORMATION: By law, you must be authorized to work in the United States in order to be employed by this employer. If you are one of the following, please check this box:

- \* A citizen or a national of the United States.
- \* An alien lawfully admitted for permanent residence.
- \* An alien authorized by the Immigration and Naturalization Service to work in the United States.

Have you ever been convicted of a felony or other crime?  Yes  No

Have you ever been dismissed from employment or resigned for alleged or admitted fraud or embezzlement?  Yes  No

Are you currently under the supervision of a court?  Yes  No

If yes to any of the above, please explain on separate sheet of paper. (You may omit convictions for minor traffic violations unless the position for which you are applying requires the operation of a motor vehicle. Conviction will not result in your automatic disqualification for employment. The seriousness of the crime, the date of conviction, and the relevance of the crime to this position will be considered.)

If the position for which you are applying requires the operation of a motor vehicle, do you have a current Texas Driver's License?  Yes  No License No. \_\_\_\_\_

Type of license:  Operator  Commercial  Chauffeur

REFERENCES: List three persons not related to you who are qualified to describe your capability for position you seek.

Name	Address	Phone	Occupation

I certify that the statements and information contained herein are true, complete and correct to the best of my knowledge, and I authorize any former employer to release to this employer or its authorized representative any and all employment records and other information it may have about my employment. I understand that any false statement(s) contained herein will be grounds for the rejection of this employment application, or for termination of my employment if later discovered.

I understand and agree that, if hired, my employment is for no definite period and may regardless of the date of payment of my wages and salary, be terminated at any time and that intentional misrepresentation on my application or during the interview process will subject me to immediate discharge.

I also understand that only written representations and promises of the Concho Valley Council of Governments will be enforceable.

Date: \_\_\_\_\_  
CVCOG 7/2006

Signature of Applicant: \_\_\_\_\_