

City of Loxley Employment Application

The City of Loxley considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, or any other legally protected status.

Position Applied For:		Date of Application:	
Last Name:	First Name:	Middle Name:	Title (Sr., Jr., Etc.):

Address (Include physical address if different from mailing):	Telephone:
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Social Security No.:	Driver's License No. & State:
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U.S. Department of Justice Immigration & Naturalization Service Form I-9, Employment Eligibility Verification completed: <div style="text-align: right; margin-top: 10px;"> <input type="checkbox"/> Yes <input type="checkbox"/> No </div>

Have you ever filed an application with the City of Loxley before? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you ever been employed by the City of Loxley before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please give approximate dates of employment: _____

Are you currently employed: <input type="checkbox"/> Yes <input type="checkbox"/> No May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If you are offered employment with the City of Loxley, when would you be available for work? _____
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Have you ever been convicted of a criminal offense other than a minor traffic violation? Yes No
 If yes, please give approximate dates, specific charges, sentence, and court where tried.

Education: College Graduate Some College High School Graduate / GED Some High School

EDUCATION: Give Schools and College(s) attended. List educational achievements on a separate sheet and attach to application along with copies of certificates, degrees or other documentation you wish to be considered in judging your qualifications for the position.

School Name	Address	Course (Major)	Degree?

REFERENCES: Provide three references (not relatives or previous employers)

Name:	Address:	Phone:

RESIDENCE: Last residences for the past six years

Complete Physical Address (not P.O. Box)	From:	To:

EMPLOYMENT HISTORY: List your employers over the past 10 years (start with most recent)

Employer:			Duties:
Job Title:			
Address:			
Phone:			
Tenure Years:	Hire Date:	Leave Date:	Reason for Leaving:
Salary Start:		Salary End:	

Employer:			Duties:
Job Title:			
Address:			
Phone:			
Tenure Years:	Hire Date:	Leave Date:	Reason for Leaving:
Salary Start:		Salary End:	

EMPLOYMENT HISTORY: Continued

Employer:			Duties:
Job Title:			
Address:			
Phone:			
Tenure Years:	Hire Date:	Leave Date:	Reason for Leaving:
Salary Start:		Salary End:	

Employer:			Duties:
Job Title:			
Address:			
Phone:			
Tenure Years:	Hire Date:	Leave Date:	Reason for Leaving:
Salary Start:		Salary End:	

If you require additional space to list your employers over the past 10 years, please use the additional blank space provided at the end of this application.

APPLICANTS STATEMENT: Please summarize your qualifications for the job you wish to obtain and tell us why you want that particular job in the space below.

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PLEASE READ CAREFULLY BEFORE SIGNING. YOUR APPLICATION WILL NOT BE CONSIDERED IF THE FOLLOWING SECTION IS NOT PROPERLY SIGNED:

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

I understand that false or misleading information given in my application or interview(s) may result in discharge in the event that I am employed by the City of Loxley.

I authorize the City of Loxley to contact any and all of the references, employers (unless otherwise indicated), agencies, and/or other persons I have listed above (as well as others not listed) to obtain previous employment information or any other pertinent information that they may have and authorize them to release any and all verifying information.

I authorize the City of Loxley to conduct a criminal history investigation in connection with my application for employment.

I release the above-mentioned references, former employers, their agents and employees, and every other person identified in this application from any and all liability for any damages that may result from the information collected by the City of Loxley.

I understand that my employment by the City of Loxley, in the event that I am hired, will be at will.

I understand that any offer of employment which I may receive from the City of Loxley will be contingent upon my passing a pre-employment physical, drug test. Police Department applicants offer of employment will also be contingent on a psychological evaluation.

I understand that this application for employment shall be considered active for a period of time not to exceed (90) days from the date it is filed.

Signature: _____

Date: _____

Employer Use Only	Schedule Interview? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, Date: _____ Time: _____ Place: _____
Pre-Employment Physical: Pass <input type="checkbox"/> Fail <input type="checkbox"/>	
Remarks:	
Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Approved Starting Salary: _____ Start Date: _____

[Type a quote from the document or the summary of an interesting point. You can position the text box anywhere in the document. Use the Drawing Tools tab to change the formatting of the pull quote text box.]

WAIVER FOR BACKGROUND INVESTIGATION

I hereby authorize Loxley Police Department to investigate and verify all statements made by me in writing and verbally during my application process. This may include but not limited to, driver's license currency, driving record, credit history, criminal record or other background information deemed appropriate and necessary by the Police Department relative to the position for which I am applying.

Date: _____

Applicant (Print): _____

Signature: _____

Social Security No.: _____

Position Applied For: _____

Witness: _____

PERSONAL INQUIRY WAIVER
AUTHORITY FOR RELEASE OF INFORMATION

TO: _____

I respectfully request and authorize you to furnish to the Loxley Police Department any information requested on my work performance, attendance record, fiduciary responsibility and eligibility for re-employment you may have concerning me. This information will be used to assist in determining my qualifications and fitness for the position of: _____.

Intending to be legally bound, hereby, I release and hold harmless the Loxley Police Department, and its officers, directors, employees, agents and other contacted from any liability, cost claims or damages of whatever nature which may result to me and arising out of and in connection with the furnishing of any information in connection with this request and authorization. Photo static copies of this authorization carry the same authority as the original.

In signing this authorization, I understand that this release will only be furnished to those employers and their representatives as listed in my application for the above-mentioned position.

Date: _____

Name of Applicant

Signature of Applicant

Social Security Number

Witness

Position Applied For