

# CITY OF DUMAS APPLICATION FOR EMPLOYMENT

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, disability, or any other legally protected status.

**(PLEASE PRINT OR TYPE)**

Position(s) Applied For	Date of Application		
Last Name	First Name	Middle Name	
Address	City	State	Zip
Home Phone No.	Mobile Phone No.	Social Security Number	Drivers License No. & State CDL?

Type of work applied for: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Seasonal / Temporary \_\_\_\_\_

Are you less than 18 years of age?  Yes  No

Are you a U.S. Citizen  Yes  No Alien Registration Number \_\_\_\_\_

Have you ever been employed with us before?  Yes  No

If Yes, list dates of employment, department, and position \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No  
*Conviction will not necessarily disqualify an applicant for employment.*

If Yes, please explain:

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Are you related by blood or marriage to any City of Dumas employee or member of the Dumas City Commission?  Yes  No

If Yes, whom? \_\_\_\_\_ Relationship: \_\_\_\_\_

# EDUCATION

	High School	Undergraduate College/University	Graduate College or Professional Academy (Fire/Police)
School Name and Location (City & State)			
Current Status <b>(Circle One)</b>	9 (FR) 10 (SO) 11 (JR) 12 (SR)	1 2 3 4	1 2 3 4
Diploma / Degree	Diploma Earned? YES NO	Degree Earned? If yes, specify _____	Degree Earned? If yes, specify _____
Describe any specialized training, group memberships and extra-curricular activities.			

## MILITARY SERVICE RECORD:

Are you a veteran? Yes \_\_\_\_\_ No \_\_\_\_\_

Branch \_\_\_\_\_ Date Entered \_\_\_\_\_ Date Discharged \_\_\_\_\_

Special Training \_\_\_\_\_ Rank \_\_\_\_\_

# REFERENCES

Provide the name, address and telephone number of three references who are **NOT** related to you and are **NOT** previous employers:

1. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Address \_\_\_\_\_

2. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Address \_\_\_\_\_

3. Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Address \_\_\_\_\_

# EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include any job-related military service assignments and volunteer activities.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving		May we contact this employer? Yes ____ No ____		

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving		May we contact this employer? Yes ____ No ____		

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving		May we contact this employer? Yes ____ No ____		

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving		May we contact this employer? Yes ____ No ____		

# SKILLS, QUALIFICATIONS, LICENSES

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Summarize job-related skills and qualifications acquired from employment or other experience.

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Summarize job-related training, licenses, and certifications acquired from employment or other experience.

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## APPLICANT'S STATEMENT

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I certify that answers given herein are true and complete to the best of my knowledge and hereby authorize the review, full disclosure and release of all records concerning myself to any duly authorized agent of the City of Dumas. I understand that any information obtained by a background investigation will be considered in determining my eligibility for employment with the City of Dumas.

I further certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any liability which may be incurred as a result of furnishing such information.

If an offer of employment is extended, I understand that I may be subject to a pre-employment physical examination and drug test.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the City of Dumas is of an "at will" nature, which means that I may resign at any time or the City of Dumas may discharge me at time with or without cause. It is further understood that the "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of the City of Dumas specifically acknowledges such change in writing.

I understand that false or misleading information given in my application or interview(s) may result in disqualification from further consideration or, if hired, may result in termination of employment.

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

\_\_\_\_\_  
Date