PLEASE PRINT ALL

City of Beebe

EXCEPT SIGNATURE		CATION FO	OR EMP	LOYI	MENT	
PLEASE COMPLETE PAGES	1-5.		С	DATE		
Name						
Last		First	ſ	Middle		Maiden
Present address		Street	City	State	Zip	
How long		Sileet			•	
Telephone ()			Oddiai Ocol	anty 140.		
If under 18, please list age						
Position applied for (1) and salary desired (2) (Be specific)			No Pro Mon Tue _	ef	ailable to work Thur Fri Sat Sun	
How many hours can you work	weekly?		Can y	ou work	nights?	
Employment desired □Fl	JLL-TIME ONLY	□PART-TI	ME ONLY	□F	ULL- OR PART	-TIME
When available to start?						
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete ma address)			R OF YEARS IPLETED	MAJOR & DEGREE
High School		,				
College						
Bus. or Trade School						
Professional School						
Please list all certifications:						1
HAVE YOU EVER BEEN CON	VICTED OF A CR	IME?	No	☐ Yes	3	
If yes, explain number of convic committed, sentence(s) impose			to conviction	n(s), how	recently such o	offense(s) was/were

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APPLICATION FOR EMPLOYMENT

DO YOU H	AVE A DRIVE	R'S LICE	NSE?	☐ Yes	□ No			
What is you	r means of tra	ansportati	on to work	ς?				
Driver's license number State of issue Expiration date				issue	e			
Have you had any accidents during the past three years? Have you had any moving violations during the past three years?			•		How many?			
					OFFICE ONLY			
Personal Computer	□ Yes □ No	PC Mac			Other sk	ills:		
Please list t	wo reference:	s other tha	an relative	s or previo	ous employers.			
Name					Name _			
Position					Position			
Company _					Compan	Company		
Address					Address			
Telephone	()				 Telepho	ne (<u>)</u>		
An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.								

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APPLICATION FOR EMPLOYMENT

Work Experience Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.					
Name of employ Address	/er	Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip (Phone number	Code		From	Start	
T Hone Hamber			То	Final	
		Your last job title			
Reason for leav	ing (be specific)				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.					
Name of employ Address	yer	Name of last supervisor	Employment dates	Pay or salary	
City, State, Zip (Phone number	Code		From	Start	
			То	Final	
		Your Last Job Title			
Reason for leav	ing (be specific)				
List the jobs you company.	n held, duties performed, skills used or learned,	advancements or pro	motions while you wo	rked at this	

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APPLICATION FOR EMPLOYMENT

Work experience	Please list your work experience for the past If you were self-employed, give firm name. At	five years beginning v	with your most recent ts if necessary.	job held.		
Name of employ	yer	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip (Phone number	Code		From	Start		
			То	Final		
		Your last job title				
Reason for leav	ing (be specific)					
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.						
			I			
Name of employ Address	/er	Name of last supervisor	Employment dates	Pay or salary		
City, State, Zip (Phone number	Code		From	Start		
			То	Final		
		Your last job title				
Reason for leav	ing (be specific)					
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.						
May we contact	your present employer? ☐ Yes ☐ No					

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by The City of Beebe (hereinafter called "The City"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other City practices, shall serve to create an actual or implied contract of employment, , or otherwise to change in any respect the or to confer any right to remain an employee of employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Mayor or City Council of The City of Beebe. Both the may end the employment relationship at any time, without specified notice undersigned and or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits. I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give The City permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release The City from any liability as a result of such contract.

I also understand that (1) The City has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, The City may request from a consumer reporting agency an investigative consumer report including information as to my credit records, criminal history, character, general reputation, personal characteristics and mode of living. Upon written request from me, The City will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant	Date:
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This City of Beebe is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with The City depends solely on your qualifications.

Thank you for completing this application form and for your interest.