

APPLICATION FOR EMPLOYMENT

CITY OF ATHENS
P.O. Box 1089, Athens, AL 35612
www.athensal.us
An Equal Opportunity Employer

APPLICATION DATE: _____	DATE RETURNED: _____
POSITION: _____	CLOSING DATE: _____
POSITION: _____	CLOSING DATE: _____
POSITION: _____	CLOSING DATE: _____

Applications Received After the Closing Deadline Will be Rejected

Print all information legibly and complete all blanks in full including all phone numbers. Follow directions carefully. If you need assistance with completion, ask Human Resources. You may attach additional documentation if needed.

Last Name _____ First Name: _____ Middle Name: _____
Address _____
City/State _____ Zip Code _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
E-mail address: _____

Are you age 18 years of age or older? Yes No
Are you legally authorized to work in the U.S.? Yes No (Proof of Identity/Eligibility Required upon Hire.)

Do you have relatives employed with the City of Athens? Yes No If yes, please provide name and relationship: _____

Do you have a valid Alabama driver's license? Yes No
State: _____ License No: _____
Do you have a current Alabama Commercial Driver's License (CDL)? Yes No
If offered employment, on what date could you begin work? _____
Have you ever worked for the City of Athens or Athens Utilities before? _____ If so, give position and dates of employment: _____
State briefly why you wish to work for the City of Athens

Have you been convicted of a misdemeanor or felony in the last ten years? _____ If yes, explain in full, including dates. Use a separate sheet of paper. (A conviction will not necessarily result in denial of employment.)

Days of the Week and Hours Available for Work			
ANY	Yes	No	
Sunday	From _____	To _____	Thursday From _____ To _____
Monday	From _____	To _____	Friday From _____ To _____
Tuesday	From _____	To _____	Saturday From _____ To _____
Wednesday	From _____	To _____	

EDUCATION

Last High School Attended: _____

Complete Address of School: _____

Did you graduate from High School? Yes No If no, do you have a GED? Yes No

Location/School GED Obtained: _____

College Attended: _____

Address: _____

Dates of Attendance: From _____ to _____ Grade Point Average: _____

Course of Study: _____

Did you receive a degree? _____ Type of Degree Received: _____

College Attended: _____

Address: _____

Dates of Attendance: From _____ to _____ Grade Point Average: _____

Course of Study: _____

Did you receive a degree? _____ Type of Degree Received: _____

College Attended: _____

Address: _____

Dates of Attendance: From _____ to _____ Grade Point Average: _____

Course of Study: _____

Did you receive a degree? _____ Type of Degree Received: _____

College Attended: _____

Address: _____

Dates of Attendance: From _____ to _____ Grade Point Average: _____

Course of Study: _____

Did you receive a degree? _____ Type of Degree Received: _____

ADDITIONAL QUALIFICATIONS

Computer Skills and Proficiencies: _____

List your training and skills directly related to the requirements of this position.

Professional Certifications, licenses, memberships: _____

Other relevant experience and training: _____

REFERENCES – Give three individuals (no relatives or former supervisors) familiar with your work.

Name	Job Title	Years Known	Telephone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT HISTORY

List **all prior** employment starting with your most recent employer first. Complete all sections in full. Do not leave blanks. List military experience. For additional work history or other experience, skills or qualifications, please attach using a separate sheet of paper. You may attach a resume.

Employer _____ Employer's Phone No. _____
Employer's Address: _____ City: _____ State: _____
Dates Employed: From: _____ To: _____ Position/Title: _____
Job Duties: _____

Supervisor's Name _____ Supervisor's Title: _____
Reason for Leaving: _____
May we contact your current employer? Yes No May we contact you at work? Yes No

Employer _____ Employer's Phone No. _____
Employer's Address: _____ City: _____ State: _____
Dates Employed: From: _____ To: _____ Position/Title: _____
Job Duties: _____

Supervisor's Name _____ Supervisor's Title: _____
Reason for Leaving: _____
May we contact your current employer? Yes No May we contact you at work? Yes No

Employer _____ Employer's Phone No. _____
Employer's Address: _____ City: _____ State: _____
Dates Employed: From: _____ To: _____ Position/Title: _____
Job Duties: _____

Supervisor's Name _____ Supervisor's Title: _____
Reason for Leaving: _____
May we contact your current employer? Yes No May we contact you at work? Yes No

Employer _____ Employer's Phone No. _____
Employer's Address: _____ City: _____ State: _____
Dates Employed: From: _____ To: _____ Position/Title: _____
Job Duties: _____

Supervisor's Name _____ Supervisor's Title: _____
Reason for Leaving: _____
May we contact your current employer? Yes No May we contact you at work? Yes No

CITY OF ATHENS APPLICATION AGREEMENT

Please read the following statements carefully; they enumerate the conditions for any employment with the City of Athens.

I hereby authorize the City of Athens or its representative as applicable to thoroughly investigate my background related to my suitability for employment and further, authorize my former employers to disclose to the City of Athens any information pertaining to my employment with them. I hereby release the City of Athens, its representative, my former employers, and all others from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that if offered employment, the offer will be contingent on my passing a pre-employment drug screen and a pre-employment physical (job specific). By signing this application, I agree to submit to a pre-employment drug screen and physical. I understand that failure to pass the drug screen and/or physical if required will result in withdrawal of the employment offer. If hired, I also agree to submit to alcohol or drug testing as a condition of employment. I agree that the City of Athens may conduct alcohol or drug screening at its sole discretion in accordance with its Substance Abuse Policy. I also understand that refusal to submit to an alcohol/drug screen will be considered a voluntary resignation of employment.

I understand that nothing contained in the application or conveyed to me during any interview which may be granted is intended to create an employment contract, implied or explicit, between me and the City of Athens. In addition, I understand that if I am employed, my employment relationship with the City of Athens is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period and may be terminated at any time at the option of myself or the City of Athens in accordance with Personnel Policies and Procedures. I understand that no promises or representations contrary to the foregoing are binding on the City of Athens unless made in writing and signed jointly by the Mayor and myself.

I understand and agree that any future changes in my title, duties, compensation, working conditions, and/or the City of Athens benefits, policies, and procedures will not alter the employment at-will agreement.

I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States on my first day of employment. I understand that I will be required to possess a valid State of Alabama or Tennessee driver's license and understand that I may be required to provide a copy of my official driving record and proof of insurance. I also understand that any offer of employment is contingent on my ability to be covered by the City of Athens auto insurance, if required for my position.

I hereby certify that I have not knowingly withheld information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Applicant's Signature

Date

VOLUNTARY SELF IDENTIFICATION/EQUAL EMPLOYMENT OPPORTUNITY DATA

The City of Athens is an Equal Employment Opportunity Employer and we do not discriminate on the basis of ethnicity, color, religion, gender, gender identity, age, national origin, disability, veteran status, sexual orientation or any other classification protected by Federal, State or local law. The information below will be used only in the compilation of data for Equal Opportunity reporting. Completion of this form is VOLUNTARY and in no way affects the decision regarding your application for employment. This form is confidential and will be maintained separately from your application form. Applicants requiring reasonable accommodation for any part of the application and hiring process should contact the Human Resources Department as noted on each vacancy announcement. Determinations on requests for reasonable accommodation are made by the Human Resources Director and will be made on a case-by-case basis.

SECTION 1:

Position Applied for _____ Today's Date _____

Applicant's Full Legal Name _____

Prior Maiden Name or Other Names Used by Applicant _____

Applicant's Current Address _____
Street City State Zip Code

SECTION 2:

GENDER: (Please Check One) Male Female

EEO ETHNICITY CATEGORY (Please check one of the descriptions below corresponding to the ethnic group with which you most identify.)

- American Indian or Alaska Native (Not Hispanic or Latino)** - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment
- Asian (Not Hispanic or Latino)** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- Black or African American (Not Hispanic or Latino)** - A person having origins in any of the black racial groups of Africa
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race
- White (Not Hispanic or Latino)** - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa
- Two or More Races** - All persons who identify with more than one of the six races

VETERAN STATUS: Are you a veteran? Yes or No