



Employment Application

The City of Sanger appreciates your interest in a position with us. It is the policy of the City of Sanger to provide equal opportunity to all employees and applicants.

The City of Sanger conducts pre-employment criminal history background, a driving record history check, credit checks, drug screen, and a post-offer medical physical for positions where applicable.

The City of Sanger does not discriminate on the basis of race, color, religion, sex, age, national origin, disability (when reasonable accommodations can be provided), disabled veteran status, or veteran of the Vietnam-era status when choosing an applicant. Direct your questions or concerns to the City of Sanger Human Resources Department at (940)458-7930.

In accordance with the Americans with Disabilities Act reasonable accommodations will be made when requested in advance. Please call (940)458-7930 for assistance.

Please return completed application to:

City of Sanger
Human Resources
502 Elm St.
P.O. Box 1729
Sanger, TX 76266
940-458-7930
940-458-4180 (fax)

Application Guidelines

To guarantee that your application will be processed correctly:

1. Complete a separate application for each position you are applying, unless otherwise specified. An employment application, unless otherwise specified, will be accepted only when a specific position opportunity notice is posted on the job vacancy board or City of Sanger website, or advertised in a publication.
2. Read the announcement carefully for the position to which you are applying. Make sure that you meet all of the minimum qualifications and conditions of employment required for the position prior to completing the application.
3. Complete the application in its entirety. Incomplete applications will not be considered. *No one will be considered an applicant unless all instructions are complied with.*
4. Return your completed application by 5 p.m. on the closing date of the position, unless otherwise stated in the announcement of the position.
5. If you are selected for a personal interview, you will be contacted by telephone.

Personal Information

Position Applied for: _____ Last four digits of Social Security Number _____
(This is used for tracking purposes only)

Please write your name as it appears on your social security card

Name: _____
Last First Middle

Address: _____ Apt # _____

City: _____ County: _____ State: _____ Zip Code _____

Home Phone _____ between hours of _____ and _____

Work Phone _____ between hours of _____ and _____

May we contact you at work? Yes _____ No _____

Please list any other name(s) you have used for school or employment: _____

If hired, when would you be able to begin work? _____

Are you at least 18 years of age? Yes _____ No _____
(If no, parent/guardian signature is required on Applicant Waiver page.)

Personal Information, Continued

Education:

Did you graduate from high school or obtain a GED? Yes _____ No _____

If no, what was the highest grade completed? _____

Name(s) and Location(s) of Colleges/Universities/Trade Schools Attended	Major/Minor	Did you graduate? Y/N	Degree Earned (If none, list number of credit hours received)

Language Skills:

In what languages, other than English are you proficient? Please list language(s) and mark areas (X) that are applicable.

Language	Read	Speak	Write	Understand

Computer Skills and Abilities:

List computer software with which you have knowledge and experience: _____

References:

List three references that are not related to you:

- | | <u>Name</u> | <u>Address</u> | <u>Telephone Number</u> |
|----|-------------|----------------|-------------------------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |

Drivers License:

Do you have a valid Driver's license? Yes _____ No _____

State Issued: _____ Expiration date: _____

Class: _____

Personal Information, continued

Employment Information:

1. Can you provide proof of both your identity and your right to work in the United States?
Yes _____ No _____

2. Are you a current employee of the City of Sanger?
Yes _____ No _____
If yes, please identify your current department and supervisor

3. Have you ever been employed by the City of Sanger:
Yes _____ No _____
If so, when and what position? _____
4. Are you currently pending trial or judgment or have you ever been convicted of a felony?
Yes _____ No _____
If yes, list date, place, violation, and fine (or sentence) for each in the space provided below.
Conviction does not necessarily disqualify applicants from employment consideration. A response of "yes" will not necessarily disqualify you as a final candidate.

5. Are you currently serving a probationary period for any offense (misdemeanor, felony, or traffic) pursuant to a deferral of adjudication disposition by a court of law? Yes _____ No _____
If yes, list date, place, violation, and fine (or sentence) for each in the space provided below.
Probation pursuant to deferral of adjudication does not necessarily disqualify applicants from employment consideration. A response of "yes" will not necessarily disqualify you as a final candidate.

6. Are you currently pending trial or judgment or have you been convicted within the past five years of any moving traffic violations? Yes _____ No _____
If yes, list date, place, violation, and fine (or sentence) for each in the space provided below. Do not include any juvenile offenses or any traffic violation fines of less than \$30.

Personal Information, continued

Employment Information:

7. Do you have any relatives currently employed by the City of Sanger?

Yes _____ No _____

If yes, please list name, relationship, and department

8. Are you related to a current member of the City Council, City Manager, City Secretary, or a member of a City board or commission? Yes _____ No _____

Employment History

List all of your employment experience within in the previous ten years, beginning with your current or most recent employer. Include military experience and account for all periods you were unemployed. You may include experience beyond the ten years minimum if the previous experience is applicable to the job for which you are applying. Please make copies of the next page if additional space is needed.

Current or most recent employer

Employer: _____ Dates of Employment: _____ to _____
Mo/Yr Mo/Yr

Address: _____

Your title: _____ Starting salary \$: _____ Ending Salary \$: _____

Department: _____ Full-Time _____ Part-Time _____ Seasonal _____ Temp _____

Supervisors Name: _____ Supervisors title: _____

Specific skills or training:

Major Duties or Responsibilities: _____

Reason for leaving or wanting to leave: _____

May we contact this employer regarding your work record? Yes ___ No ___

Phone Number _____

Employment History, continued

Previous Employer

Employer: _____ Dates of Employment: _____ to _____
Mo/Yr Mo/Yr.

Address: _____

Your title: _____ Starting salary \$: _____ Ending Salary \$: _____
Department: _____ Full-Time _____ Part-Time _____ Seasonal _____ Temp _____

Supervisors Name: _____ Supervisors title: _____

Specific skills or training:

Major Duties or Responsibilities: _____

Reason for leaving or wanting to leave: _____

May we contact this employer regarding your work record? Yes ___ No ___

Phone Number _____

Previous Employer

Employer: _____ Dates of Employment: _____ to _____
Mo/Yr Mo/Yr.

Address: _____

Your title: _____ Starting salary \$: _____ Ending Salary \$: _____
Department: _____ Full-Time _____ Part-Time _____ Seasonal _____ Temp _____

Supervisors Name: _____ Supervisors title: _____

Specific skills or training:

Major Duties or Responsibilities: _____

Reason for leaving or wanting to leave: _____

May we contact this employer regarding your work record? Yes ___ No ___

Phone Number _____

Reason for lapses in employment history in the previous ten years:

Applicant Waiver

Before signing this application, please read the following waiver carefully:

1. I have read and understand the announcement for the position for which I am applying and certify that the answers given in this application are true and complete to the best of my knowledge. I understand that **incomplete** or **inaccurate** information may result in disqualification of this application.
2. I understand I must pass a drug screen, a background check and a verification of Social Security Number as a condition of final appointment.
3. I also understand that I may be required to pass all or some of the following checks:
 - a. Verification of possession of valid driver's license
 - b. Review of my driving record which is on file with appropriate law enforcement agencies
 - c. Verification of work history
 - d. Post-offer medical physical for certain positions
 - e. Credit check for certain positions
 - f. Drug Screen
 - g. Criminal history background check
4. I authorize all current and previous employers to release job related information to the City of Sanger and any agent on its behalf. However, I understand if, in the employment history section, I have answered "No" to the question "May we contact this employer?" that contact with the employer will not be made without my specific authorization.
5. I authorize the City of Sanger and any agent on its behalf to verify all job-related information on this application to determine my qualifications for the position for which I am applying. Moreover, I hereby release the City of Sanger and any agent on its behalf from any and all liability of whatsoever nature by reason of requesting such information from any person.
6. I understand that if employed, **false statements** or **omissions** on this application or any other material required for employment shall be considered sufficient cause for dismissal.
7. I understand that my employment and compensation can be terminated at any time without cause, and with or without notice at anytime, at the option of the City of Sanger. I understand that no one has authority to promise permanent employment or employment for a definite period of time. I understand that the City of Sanger is an "at-will" employer and that either party for any reason not expressly prohibited by state law can terminate the employment relationship at any time.

Printed Name: _____

Signature: _____ Date: _____

ATTENTION: If you are under the age of 18 years old, your parent/guardian's signature is required:

Parent/ Guardian Signature: _____ Date: _____

The City of Sanger requests your cooperation in the completion of this form. The information requested enables the City to report accurate, statistical information to both the state and federal governments.

The Information contained in this form will not be made available to any person involved in the hiring process.

Completion of this section is voluntary and does not affect the application process.

If you need reasonable accommodations for the interview or employment please contact our Human Resources Department at (940)458-7930.



Name: _____

Applicant Information

This information will only be used for record keeping, statistical purposes, and to comply with Equal Employment Opportunity/Affirmative Action law, which helps to determine how effective our recruitment efforts are in reaching a broad cross-section of people in a recruitment area:

Position applied for:

Check the appropriate category:

Sex:

- Male
- Female

Education Level:

- GED
- H.S. Diploma
- College Credit Hours; How many? ____
- Associates
- Bachelors
- Masters
- Ph.D.

Racial Group:

- White
- Black (Not of Hispanic origin)
- Hispanic
- Asian/Pacific Islander
- American Indian/Alaskan Native
- Other-Specify (Optional): _____

How did you learn about this position?

- Advertisement
 - Denton Record Chronicle
 - Sanger Courier
- Walk-In
- www.City of Sanger.com
- Employee Referral
 - Name: _____
- Other: _____