City of Stanton P. O. Box 370 ** Phone 756-3301 Stanton, Texas 79782

	Permanent, Temporary	Full Time or Part Time	Date of App	plication		
	PPLYING FOR: _ CANT PLEASE READ:	response may result in	n disqualification for		arge, if er	to verification. A false or misleading nployed. This application will not be application is signed.
IDENTITY: FULL NAME:						
PHONE:	(LAST) OPT	TONAL PHONE: _		(FIRST)		(MIDDLE)
ADDRESS:(STREET)	(CITY)	(STATE)	(ZIP)	
List your last four job and work back		experience), includ	ling MILITARY	and volunteer work.	Begin	with your current or most recent
LAST OR CURR	ENT EMPLOYER:			Mo		Starting Date: _Yr
Mailing Address	ss:					_Ending Date:
Name of Super	visor:			Mo		_Yr _Starting Salary: _ Per
Your Position:						_Ending Salary: _Per
Reason for Lea May we contac Your Duties:	ving: t this employer?					
NEXT PREVIOU	S EMPLOYER:					
Mailing Address	ss:					Mo. Yr. Ending Date: Yr. Yr. Yr.
Name of Super	visor:					Starting Salary:
Your Position:						Per Ending Salary: Per
Reason for Lea	ving:					101
May we contac Your Duties:	t this employer?					
	S EMPLOYER:					Starting Date:
Mailing Address	ss:					Mo. Yr. Ending Date: Yr. Yr.
Name of Super	visor:					_Starting Salary:
Your Position:						Per _Ending Salary: Per
Reason for Lea May we contac	ving: t this employer?					101

Your Duties:								
Please explain	in detail any time	apses in the above re	ecord d	ue to ı	inemplo	yment	t or other reaso	ons:
<u>DRIVING RE</u>	CORD:							
Type: Operator	valid Texas Driver:	r's License ?Commercia	al:	_Drive	r's Lice	ense N	umber Chauffeur:	Any
How many aut Have you ever Why?	omobile accidents? had your license so	uspended or revoked	How m ?	any w	hile on If	the job yes, wl	o? hen?	
EDUCATION	<u>:</u>		CIDC	V E II	IQUE0	T CD A	DE COMPLE	
Grade 1 2 3	e School 4 5 6 7 8	High School 9 10 11 12	CIRC	LE H	1 2	ollege 3	ADE COMPLE Grad 4 1	uate School 2 3
KIND	NAME AND LOCA	ATION OF SCHOOL	FRO MO. YR.	OM	MO. YR.	0	GRADUATE (CIRCLE)	DEGREE & MAJOR
HIGH SCHOOL							YES NO	
COLLEGE OR UNIVERSITY							YES NO	
OTHER SCHOOLS ATTENDED							YES NO	
		training, educationa						Place:
SKILLS AND	<u>CERTIFICATIO</u>	<u>V:</u>						
LIST ALL VAL	ID PROFESSIONAL	L LICENSE, REGISTE	RATION	IS ANI	O CERT	IFICAT	ΓES YOU PRES	SENTLY HOLD
					Numbe	r:		
Type: Expiration Dat Type:	e:							
_		can operate skillfully	·					

In the space below provide any			
	additional information concerning		qualifies you for the position
Will you work overtime whenev	ver scheduled or required?	Yes	No
Can you work weekends whene	ver scheduled or required?	Yes	No
Would you accept part-time wo	rk?	Yes	No
Would you accept temporary w	ork?	Yes	No
Special skills you posses: (Elec	trical, Mechanical, Clerical or Tec	chnical):	
What hours are you available for	or work?		
What means of transportation w	vill you use to get to work?		
	rriage to the Mayor, any member me, relationship, title and departn RELATIONSHIP		
	by the City? Yes or No. If yes,	list department(s), p	osition(s) held and dates of
employment below.	by the City? Yes or No. If yes, JOB TITLE:	list department(s), p FROM:	osition(s) held and dates of
employment below. DEPARTMENT:	JOB TITLE:		
employment below. DEPARTMENT: Do you reside within the corpor How long have you lived at you	JOB TITLE: rate city limits? Yes or No. ar present address?	FROM:	TO:
employment below. DEPARTMENT: Do you reside within the corpor How long have you lived at you	JOB TITLE: rate city limits? Yes or No. ar present address?	FROM:	TO:
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employment below. DEPARTMENT: Do you reside within the corpor How long have you lived at you Previous address: (Street Are you legally eligible for emp Have you ever been convicted, explosives offense against the la	JOB TITLE: rate city limits? Yes or No. rr present address? tor PO Box) Coloyment in the U.S.A.? Yes or No. forfeited collateral, or are you nowaw? Yes or No. If yes, list all so	FROM: ity) No. Date of Birt w under charges for uch offenses and sta	TO: (State) (Zip) h: any felony or any firearms or
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CITY OF STANTON APPLICATION FOR EMPLOYMENT

IN COMPLIANCE WITH FEDERAL AND STATE EQUAL EMPLOYMENT OPPORTUNITY LAWS, QUALIFIED APPLICANTS ARE CONSIDERED FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARTIAL STATUS, OR THE PRESENCE OF A NON-JOB-RELATED MEDICAL CONDITION OR HANDICAP. Do you wish to answer these questions? Yes _____No (Complete only identification data at bottom of page.) What is your Ethnic group? Black Asian Hispanic ____Other What is your sex? Female What is your Age Category? _____18 to 21 _____22 to 24 Under 18 _____35 to 44 ______45 to 54 25 to 34 _____55 to 64 ____65 and up Are you a veteran of the U.S. Armed Forces? Yes Name:___ (Please Print) Your interest in our organization resulted from (you may check more than one if applicable): City Official/Employee _____Texas Employment Commission Local Newspaper Ad _____Private Employment Agency Ad in Journal Radio/Television Ad _____Ad in Newspaper

Other (Specify)