

**CITY OF MADISONVILLE**  
**210 WEST COTTONWOOD PHONE 936-348-2748**  
**MADISONVILLE, TEXAS 77864**  
**FAX # 936-348-3815**

**EMPLOYMENT APPLICATION**

**EQUAL OPPORTUNITY EMPLOYER M/F/D**

The Age Discrimination in Employment Act of 1967 forbids discrimination against persons over the age 40

**ALL QUESTIONS MUST BE ANSWERED**

Name _____	Drivers License # _____
Street Address _____	Social Security # _____
City, State & Zip Code _____	Phone # _____
All Applicants for employment must be at least 18 Can you submit proof of age after employment? _____	Position _____ Desire _____
Has bond ever been refused? _____	Background if any: _____
Have you ever been convicted of a felony? _____	If so, please give details: _____
Are you related by blood or marriage to any employee, or former employee of the City? _____ Referred By: _____	If "yes" state name relationship & employee: _____ If you are not an American Citizen, do you you have a visa which permits you to work in this country? ____ Yes ____ No ____
Location preferences, if any: _____	

**EDUCATION**

Name/School	Major Subject	No of Yrs. Completed	Graduated? Degree?
High School _____			
College _____			
Graduate School _____			
Other Trade/Business School _____			
Describe any Honors/Awards _____			
Other (Trade/Business School) _____			
Other Course Work Applicable _____			

**U.S. MILITARY SERVICE**

Years served	Branch of Service	Rank at Discharge	Duties
_____			
Are you a member of the National Guard or Reserve? _____ Yes _____ No _____			

**EMPLOYMENT HISTORY**

1. Present or last employer: \_\_\_\_\_ Phone No. \_\_\_\_\_  
Address \_\_\_\_\_ Date Started: \_\_\_\_\_ Date Left: \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_ Their Title \_\_\_\_\_ Your Title: \_\_\_\_\_  
Annual Salary at Start: \_\_\_\_\_ Annual Salary on Leaving \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Your duties: \_\_\_\_\_

2. Previous employer: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone No. \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_ Date Started: \_\_\_\_\_ Date Left: \_\_\_\_\_  
Annual Salary at Start: \_\_\_\_\_ Annual Salary on Leaving \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Your duties: \_\_\_\_\_

**MACHINES OPERATED**

Please Identify by Type/Model

Typewriter \_\_\_\_\_ Terminals \_\_\_\_\_ Typing \_\_\_\_\_ wpm  
Word Processor \_\_\_\_\_ Microcomputer \_\_\_\_\_ Shorthand \_\_\_\_\_ wpm  
Transcriber \_\_\_\_\_ Other \_\_\_\_\_ Date Entry \_\_\_\_\_  
Calculator \_\_\_\_\_ Touch \_\_ Yes \_\_ No Date Processing Computers \_\_\_\_\_  
Backhoe \_\_\_\_\_ Dump Truck \_\_\_\_\_ Chipper \_\_\_\_\_  
Slope Mower \_\_\_\_\_ Sewer Machine \_\_\_\_\_ Maintainer \_\_\_\_\_

Date Available: \_\_\_\_\_ Starting Salary Desired: \_\_\_\_\_  
In case of emergency, call: \_\_\_\_\_ Phone #: \_\_\_\_\_

**PRE-EMPLOYMENT STATEMENT**

I authorize the City of Madisonville to make any inquiries they desire regarding my education, employment, ability, habits and personal character for the purpose of determining my fitness for employment. I also authorize previous employers, or any other person to whom the City of Madisonville may refer, to give any and all information regarding my employment or scholastic record together with any information, personal or otherwise, and I hereby release such persons, and any companies which they represent, from all liability or any damages whatsoever in connection with their compliance. I understand that misrepresentation or omission of any fact or circumstance called for in this application which would affect my application unfavorably, or receipt of unsatisfactory references, will be sufficient cause for termination without liability to me/or salary as may have been earned at the time of my termination.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_