



CITY OF FARMINGTON Employment Application

354 W. Main, Farmington, AR. 72730
479-267-3865

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available to Start Work	Desired Salary		
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Will you travel if required?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Will you work overtime if required? YES <input type="checkbox"/> NO <input type="checkbox"/>

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three references that are not related to you.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

SPECIAL TRAINING OR SKILLS

Languages, machine operation, etc., that would be of benefit in the job for which you are applying.

SOCIAL SECURITY NUMBER _____ - _____ - _____

PLEASE PROVIDE YOUR DRIVER'S LICENSE NUMBER IF DRIVING IS REQUIRED FOR THIS JOB.

_____ State _____

PREVIOUS EMPLOYMENT (AT LEAST 10 YEARS IF APPLICABLE, USE BACK OF SHEET IF NECESSARY)

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO

Company _____ Phone () _____

Address _____ Supervisor _____

Job Title _____ Starting Salary \$ _____ Ending Salary \$ _____

Responsibilities _____

From _____ To _____ Reason for Leaving _____

May we contact your previous supervisor for a reference? YES NO

MILITARY SERVICE

Branch _____ From _____ To _____

Rank at Discharge _____

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I understand with an offer of employment a drug test will be required.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States as required by federal immigration laws.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

Signature

Date