

**CITY OF BEEVILLE, TEXAS
EMPLOYMENT APPLICATION**

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.

(PLEASE PRINT)

Date _____

Name _____
Last First Middle

Address _____
Number Street City State Zip Code

Telephone _____ / _____ Social Security Number _____
Area Code

State Age if under 18 or over 70 _____ Drivers License _____
State Number

Position(s) Applied For _____

Have you ever been employed here? Yes No

If YES, give date of last employment. _____

Are you employed now? Yes No May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

On what date would you be available for work? _____

Are you available for work Full Time Part Time Temporary

Have you ever been convicted of a felony? Yes No

If YES, please explain _____

Are you related to any City Councilmember, or the City Manager, within the 3rd degree by consanguinity (relationship by blood or birth) or the 2nd degree by affinity (relationship by marriage)?

Yes No

MILITARY SERVICE RECORD

Veteran of the U.S. military service? Yes No If YES, Branch _____

Dates of Duty: From: _____ To: _____

Honorable Discharge Yes No Rank at Discharge _____

EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed	Did You Graduate?	List Diploma
Elementary		X	5 6	<input type="checkbox"/> Yes	X
			7 8	<input type="checkbox"/> No	
High		X	1 2	<input type="checkbox"/> Yes	X
			3 4	<input type="checkbox"/> No	
College			1 2	<input type="checkbox"/> Yes	
			3 4	<input type="checkbox"/> No	
Other (Specify)			1 2	<input type="checkbox"/> Yes	
			3 4	<input type="checkbox"/> No	

EMPLOYMENT EXPERIENCE

Start with your present, or last job. If you need additional space, please continue on a separate sheet of paper.

1. Employer _____ Address _____
Job Title _____ Employed: From: _____ To: _____
Duties/Responsibilities _____
_____ Salary/Hourly Wage _____
Reason for Leaving _____

2. Employer _____ Address _____
Job Title _____ Employed: From: _____ To: _____
Duties/Responsibilities _____
_____ Salary/Hourly Wage _____
Reason for Leaving _____

3. Employer _____ Address _____
Job Title _____ Employed: From: _____ To: _____
Duties/Responsibilities _____
_____ Salary/Hourly Wage _____
Reason for Leaving _____

Summarize special skills and qualifications acquired from employment or other experience _____

Give name, address, and telephone number of three personal references who are not related to you, and are not previous employers.

Name Address Phone

Name Address Phone

Name Address Phone

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigation or credit agencies or bureaus of your choice. I also understand that a physical examination is required before employment.

Signature

Date

DO NOT WRITE BELOW THIS LINE

Arrange Interview Yes No

Interviewer's Remarks: _____

Employed Yes No Date of Employment _____

Job Title _____ Department _____

Salary Range and Step _____

Authorized _____ Date _____

Title _____

**BEEVILLE POLICE DEPARTMENT
400 N. WASHINGTON STREET
BEEVILLE, TEXAS 78102**

**Assumption of Risks, Covenant Not to Sue
&
Authorization for Release of Personal Information**

THE STATE OF TEXAS }
COUNTY OF BEE }

I, _____ do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Beeville Police Department, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions, including records of loans; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veteran's Administration; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me; and the records and recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by the Beeville Police Department. I also certify that any person(s) who may furnish such information concerning me shall not be held legally accountable for giving this information in any way; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original wiring of my signature.

(Signature including maiden name)

Date of Birth

(Address)

Social Security Number

Telephone

Witness