

CITY OF BRYANT

Employment Application

Equal Opportunity Employer

Employees of and applicants for employment with the City of Bryant shall be afforded equal opportunity in all aspects of employment without regard to race, color, sex, age, religion, national origin, disability, or military veteran status. As a means of accommodating persons with specific disabilities that prevent them from completing this application, confidential assistance completing this application may be obtained upon request.

INSTRUCTIONS

position sought later become vacant. **This application will not be valid and processed unless completed in full.**

APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		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"/>	
Are you over the age of 18?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no and under the age of 16, a Work Permit is needed	
Have you ever worked for the City?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever applied for a job with the City before?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a crime?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, list the offense, date of offense, conviction date, and	
Are you lawfully authorized to operate a motor vehicle in the State of Arkansas?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, provide driver's license number and state of issuance:	
Have you ever been fired or asked to resign from a job?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, please explain:	
From your review of the description of the job for which you are applying, are you able to perform its essential functions		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, please explain:	
Are you willing to work overtime?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Are there days, including weekends, or times of day on which you are unable to work?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, please state days and/or times of day:	
Is there any reason you could not regularly be at work on time?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, please explain:	
If hired, would you be willing to perform other duties as assigned?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Can you travel, if the job requires it?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Type of employment desired:		Full-Time <input type="checkbox"/>	Part-Time <input type="checkbox"/>	Seasonal <input type="checkbox"/>	

EDUCATION

High School	Address
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Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree/ Certification	Number of Years Completed:
College			Address	
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree/ Certification	Number of Years Completed:
Other			Address	
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree/ Certification	Number of Years Completed

TRAINING & SKILLS	
Please list training, skills, certifications, licenses, etc., that you feel are applicable to the position for which you are applying. If you have none, please indicate below by writing "n/a."	

PREVIOUS EMPLOYMENT			
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 <input type="checkbox"/>	NO <input type="checkbox"/>
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 <input type="checkbox"/>	NO <input type="checkbox"/>
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 <input type="checkbox"/>	NO <input type="checkbox"/>

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge

If other than honorable, explain

ACKNOWLEDGEMENT AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge and may be verified by the City and its agents, employees, or representatives. I hereby authorize the City and its agents, employees, or representatives to make such investigations or inquiries of my employment history and other related matters as may be necessary in arriving at an employment decision. I hereby release all employers, educational institutions, and persons from all liability in responding to inquiries in connection with this application.

I understand and agree that any misrepresentation or omission of information in this application will constitute justification for refusal or termination of employment.

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

I understand and agree that the employment for which I am making application is at-will and such employment may be terminated at any time with or without cause, without prior notice, by either me or the City. There will be no agreement, express or implied between the City and me for any specific period of employment, unless made in writing and signed by the Mayor and full City Council.

Signature _____ Date _____

THIS SECTION TO BE COMPLETED BY THE EMPLOYEE'S SUPERVISOR

DO YOU SUPPORT THE EMPLOYEE'S APPLICATION FOR THIS VACANCY?

PLEASE GIVE REASONS FOR YOUR ANSWER.

IS THE EMPLOYEE CURRENTLY SUBJECT TO A PERFORMANCE IMPROVEMENT PLAN? YES NO

IS THE EMPLOYEE CURRENTLY SUBJECT TO AN INFORMAL/FORMAL ATTENDANCE REVIEW? YES NO

TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE STATEMENT I HAVE MADE IN THIS APPLICATION IS TRUE AND CORRECT.

MANAGER'S SIGNATURE _____ DATE _____

PRINT NAME _____ DATE _____

VOLUNTEER APPLICANT DATA RECORD

The City of Bryant is an Equal Opportunity Employer. We do not discriminate in hiring or employment because of race, color, creed, religion, national origin, sex, age, disability, or veteran status. Various government agencies request statistical information regarding our hiring practices. Your cooperation in completing this section is completely voluntary.

Any information gathered is strictly confidential. Your answers will in no way be used against you. Thank you for your cooperation.

Please specify your sex

- Male
- Female
- I choose not to disclose

Spanish/Hispanic/Latino

- Yes
- No
- I choose not to disclose

Please Specify Race

- White
- Black or African American
- American Indian or Alaskan Native
- Asian
- Native Hawaiian or Pacific Islander
- I choose not to disclose

Signature

Date