

# Application for Employment

PLEASE PRINT

## City of Mangum

201 N. Oklahoma Ave.  
Mangum, OK 73554  
Phone: 580-782-2250

Position applying for: \_\_\_\_\_

Date: \_\_\_\_\_

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the City Clerks Office.

Name \_\_\_\_\_

Last

First

Middle

Address \_\_\_\_\_

Street

City

State

Zip code

Telephone# ( ) \_\_\_\_\_ Mobile/Beeper/Other Phone #( ) \_\_\_\_\_ Social Security # \_\_\_\_\_

If necessary, best time to call you at home..... a.m./p.m.

May we contact you at work?..... Yes \_\_\_ No \_\_\_

If yes, work number and best time to call ..... a.m./p.m.

If you are under 18 and it is required, can you furnish a work permit?..... Yes \_\_\_ No \_\_\_

If no, please explain \_\_\_\_\_

Have you submitted an application here before? ..... Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

Are you related to any city employee or any member of the City Council?..... Yes \_\_\_ No \_\_\_

If so, give name, department, and relationship: \_\_\_\_\_

Are you legally eligible for employment in this country?..... Yes \_\_\_ No \_\_\_

Date available for work..... / /

Do you speak any foreign language?..... Yes \_\_\_ No \_\_\_

If so, what language \_\_\_\_\_

List experience related to the position you are applying for: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of a crime in the last seven (7) years?..... Yes \_\_\_ No \_\_\_

If yes, please explain \_\_\_\_\_ conviction will **not**

necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.

Do you hold a current and valid Oklahoma operator's or CDL driver's license (with endorsements specific to the equipment you will be operating)..... Yes \_\_\_ No \_\_\_

Give type, expiration date, and number: \_\_\_\_\_

## Employment History

Provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

Employer Telephone Dates employed Summarize the type of work  
( ) From To Performed and Job Responsibilities

Address

Job Title Hourly Rate/Salary  
Starting

IMMEDIATE SUPERVISOR AND TITLE \$ PER

Reason for leaving Hourly Rate/Salary  
Final

May we contact for reference? Yes No Later  
\$ PER

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Reason for leaving Hourly Rate/Salary  
Final

May we contact for reference? Yes No Later  
\$ PER

Comments INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Military Service: \_\_\_\_\_ Branch: \_\_\_\_\_

Date entered: \_\_\_\_\_ Date and type of discharge: \_\_\_\_\_

**Educational Background** (if job-related)

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank. E. Major field of study. F. Minor field of study (if applicable).

A. School	B. Years Completed	C. Degree Diploma	D. GPA Class Rank	E. Major	F. Minor

**References**

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Telephone Number	Years Known

**Additional information/Skills & Qualifications**

List professional, trade, business, or civic associations and any office held. *Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status.* Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

ORGANIZATION	OFFICE HELD

List special accomplishments, publications, awards, etc. *Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status.* \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and its representatives for seeking, gathering and using such information and all others persons, corporations or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question of this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 6 months. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is the company's policy not to refuse to hire a qualified individual with a disability because of that person's need for reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I understand that I am required to abide by all rules and regulations of the City of Mangum.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_