

APPLICATION FOR EMPLOYMENT

City of Ingleside
City Secretary
P.O. Drawer 400
Ingleside, TX 78362

2671 San Angelo St.
Phone: 361-776-2517
Fax: 361-775-0109
inglesidecs@cableone.net

INSTRUCTIONS TO APPLICANTS

Thank you for your interest in employment with the City of Ingleside. This application form is an important step in a process that will allow the City to select a qualified individual for employment. It is very important that you complete the form accurately and completely. Print legibly or type your application.

The City of Ingleside is an equal employment opportunity employer. The City complies with Title VII of the Civil Rights Act of 1964, as amended, and does not discriminate on the basis of race, religion, color, sex, or national origin. The City complies with all provisions of the Americans with Disabilities Act. If, because of a disability, you require assistance in completing this application or require special assistance during the application process, you may contact the City Secretary at (361) 776-2517.

All qualified applicants for employment as Police Officers for the Ingleside Police Department will undergo written testing. The results of the written test will determine whether an applicant continues to the oral interview portion of the application process.

Applicants who are selected to proceed with oral interviews will be notified by telephone as to the date and time of the scheduled interviews. After completing the written test, applicants should not attempt to call the department for test results. Applicants who are not selected for oral interviews will be notified by mail.

The City may terminate an employee for falsifying an employment application at any time after the falsification is discovered. Omission of pertinent information with the intent to conceal a fact is considered a falsification.

The City reserves the right to abandon the application process at any time and to re-advertise for new or additional applicants.

An applicant who is unable to report for written testing or for oral interview will be disqualified. The City will not reschedule a written test or oral interview.

Application should be mailed or delivered to:

City of Ingleside
City Secretary
P.O. Drawer 400
Ingleside, TX 78362

If an advertisement for a position includes an application return deadline, no application will be accepted after the deadline. Applicants returning an application form by mail should mail early to insure arrival by the deadline. The City assumes no liability for delays in delivery by the U.S. Postal Service.

CITY OF INGLESIDE APPLICATION FOR EMPLOYMENT

City of Ingleside
City Secretary
P.O. Drawer 400
Ingleside, TX 78362

2671 San Angelo Street
Phone: 361-776-2517
Fax: 361-775-0109
inglesidecs@cableone.net

Important: Read terms of employment carefully. The City of Ingleside is an at-will employer. Print or type answers to every question. The City of Ingleside provides equal employment opportunity without regard to age, sex, race, color, religion, national origin, or disability.

Last Name:		First Name:		Middle Name:	Date of Birth:
Current Address:		City:	ST:	Zip:	Phone:
Permanent Address (if different)		City:	ST:	Zip:	Phone:
Nickname, or name known by during previous employments:				Place of Birth (City, State)	
DL Number	State	Type	SSN	Certification Level <i>Chk all that apply</i>	
Peace Officer License: Yes <input type="checkbox"/> No <input type="checkbox"/> Pending <input type="checkbox"/> Reserve Officer <input type="checkbox"/>			State:	<input type="checkbox"/> Basic	<input type="checkbox"/> Intrm
				<input type="checkbox"/> Adv	<input type="checkbox"/> Master
				<input type="checkbox"/> Instr	
If License is pending, give dates and details			Academy attended	Date Graduated	
Have you ever been convicted of non-traffic offense? Yes <input type="checkbox"/> No <input type="checkbox"/>			If Yes, explain (Attach additional sheets if necessary)		
Have you ever been convicted of DWI, DUI, or DUID? Yes <input type="checkbox"/> No <input type="checkbox"/>			If Yes, explain (Attach additional sheets if necessary)		

Position applied for:		Salary expected	How did you learn of this opening?	
Are you willing to travel? Yes <input type="checkbox"/> No <input type="checkbox"/>		When can you begin?		Are you willing to work overtime? Yes <input type="checkbox"/> No <input type="checkbox"/>
Person to contact in case of emergency		Relationship	Address	Phone
Do you have a legal right to accept employment in the US? Yes <input type="checkbox"/> No <input type="checkbox"/>		Are there any days or times that you cannot work?		
Dates of any previous applications for employment with the City of Ingleside:			Relatives employed by the City	

Education

School	Name	Location	Graduation Date	Degree Attained
Grammar				
High School				
College				

If applicable, use Page 6 (Professional Training List) to list professional training attended. DO NOT attach copies of diplomas. Use additional sheets as needed to show other academic schooling.

EMPLOYMENT HISTORY

Begin with most recent employment. Use additional sheets as necessary.

From	To	Employer Name	Phone
Position Held		Address	
Duties			
Supervisor		Reason for Leaving	
From	To	Employer Name	Phone
Position Held		Address	
Duties			
Supervisor		Reason for Leaving	
From	To	Employer Name	Phone
Position Held		Address	
Duties			
Supervisor		Reason for Leaving	
From	To	Employer Name	Phone
Position Held		Address	
Duties			
Supervisor		Reason for Leaving	
From	To	Employer Name	Phone
Position Held		Address	
Duties			
Supervisor		Reason for Leaving	

REFERENCES

Include at least three (3) references. Do not use relatives or employers.

Name	Address	Phone	Yrs Known

MILITARY SERVICE
Attach copy of DD-214

Branch	Rank/Pay Grade	Nature of Duty or Training (MOS)
Type of Discharge	Date of Discharge	Reserve Commitment

APPLICANT DECLARATIONS

Use additional sheets as necessary.

Describe the Frequency and extent of your use of alcoholic beverages.
Have you ever used marijuana or any other substance or illicit drug not prescribed by a physician? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe.
Have you ever furnished illicit drugs or a controlled substance to anyone? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe.
Do you have beliefs or personal convictions that would prevent you from lawfully taking a human life? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe.

TERMS OF EMPLOYMENT

I, the undersigned, state that all information given by me in this application is true to the best of my knowledge. I authorize the City of Ingleside (hereafter called "City") to verify such information and to contact any reference given by me. I agree that:

- 1 Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other customary practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the City, or otherwise to change in any respect the employment-at-will relationship between the City and the undersigned, and that relationship cannot be altered except by a written instrument signed by the City Manager or the City of Ingleside. Both the undersigned and the City may end the employment relationship at any time, without specified notice or reason, and without liability by the City to the undersigned except for earned wages or salary.
- 2 My employment may be terminated by the City at any time without advance notice. The City's only obligation being to pay wages or salary earned by me to the date of my termination. Without limitation, failure to abide by City rules, policies and regulations, failure to pass a City physical examination and falsification of any information given by me in this application will entitle the city to terminate my employment at any time after the rule, regulation, or policy infraction, or falsification is discovered.
- 3 This application is a public record and the city shall have the right at any time after the termination of my employment, to furnish to others information concerning my employment record with the City including information in this employment application.

Printed Name _____
Signature _____
Date _____

City of Ingleside
City Secretary
P.O. Drawer 400
Ingleside, TX 78362

2671 San Angelo St.
Phone: 361-776-2517
Fax: 361-775-0109
inglesidecs@cableone.net

AUTHORITY TO RELEASE EMPLOYMENT INFORMATION

The undersigned has applied for a position with the City of Ingleside and in doing so has issued this authorization to release employment records to the City of Ingleside.

To the officers, employees, and agents of any entity or organization of which I have been employed or associated:

I am being considered for employment at the City of Ingleside. I wish to have the City of Ingleside fully advised of my record and performance as your former employee. This information is being sought by the City of Ingleside for the purpose of evaluating my suitability for employment. I understand that the information you provide may include factual, inferred, and opinion material.

I make this request for the purpose of having you answer any and all questions by the City of Ingleside concerning me. For doing so, I hereby release you, your officers, employees, and agents from any and all liability to me for the rendering of any such information.

A photostatic or facsimile (fax) copy of this affidavit is a valid instrument and holds the same force and validity as an original.

Printed Name

Social Security Number

Signature

Date

PROFESSIONAL TRAINING LIST (OPTIONAL)

