

Town of Falkville
21 North 1st Avenue P. O. Box 407
Falkville, AL 35622
Office #: 256-784-5922; Fax #: 256-784-9510

Application for Employment

Equal access to programs, services and employment is available to all persons.

Those applicants requiring reasonable accommodations to the application and/or interview process should notify the Mayor.

Position* applied for _____ Date _____

*A separate application is required for each position.

Name _____
Last First Middle

Address _____
Street City State Zip

Telephone/Cell # _____ Other contact # _____

Email address _____ Driver's License #/State _____ CDL _____

Date available for work _____ Salary Requirement _____
Per hour or Annual

Type of employment desired: _____ Full time _____ Part time _____ Temporary

If required are you available for: Nights/Weekends: Yes _____ No _____ Overnight Travel: Yes _____ No _____

Have you been employed by the Town of Falkville before? Yes _____ No _____ If yes, when _____

Can you perform the essential functions of this position? _____

Have you been convicted* of a crime in the last 7 years? Yes _____ No _____ If yes, explain _____

*Conviction will not necessarily be a bar to employment. Each instance will be considered in relation to the position for which you are applying.

Have you ever been terminated from a job for cause? Yes _____ No _____ If yes, explain _____

SKILLS AND QUALIFICATIONS – List any skills, licenses, certificates, or training (Including military) which are related to the job you seek. Include machinery/equipment you can operate and computer software proficiency. _____

EDUCATIONAL BACKGROUND

	School Name and Address	Years Completed	Type of Diploma or Degree Received
High School			
Undergraduate School			
Graduate School			
Technical School			

EMPLOYMENT HISTORY – Provide the following information for your past 4 employers, assignments, or volunteer activities, starting with the most recent.

Employer Name & Address _____

Supervisor Name and Company Phone # _____

Employment Dates: From _____ To _____ Job Title _____

Ending Salary _____ Reason for Leaving _____

Primary Duties _____

Employer Name & Address _____

Supervisor Name and Company Phone # _____

Employment Dates: From _____ To _____ Job Title _____

Ending Salary _____ Reason for Leaving _____

Primary Duties _____

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Employer Name & Address _____

Supervisor Name and Company Phone # _____

Employment Dates: From _____ To _____ Job Title _____

Ending Salary _____ Reason for Leaving _____

Primary Duties _____

Employer Name & Address _____

Supervisor Name and Company Phone # _____

Employment Dates: From _____ To _____ Job Title _____

Ending Salary _____ Reason for Leaving _____

Primary Duties _____

PERSONAL REFERENCES (Do not include relatives or past employers)

1. Name & Address _____

_____ Phone # _____ Years Known _____

2. Name & Address _____

_____ Phone # _____ Years Known _____

3. Name & Address _____

_____ Phone # _____ Years Known _____

APPLICANT'S CONSENT AND AGREEMENT

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand and agree that falsified information or significant omissions may disqualify me from further consideration and may be considered justification for dismissal if discovered after employment.

I authorize all references to give the Town of Falkville any and all information concerning my previous employment and education and any pertinent information they may have, personal or otherwise, and release all parties, such persons and the Town of Falkville from liability for any claim that could arise from furnishing any such information to the Town of Falkville.

I understand that the Town of Falkville does not unlawfully discriminate in employment and I acknowledge that no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand and agree that I will be required to provide a clear motor vehicle report, credit check, pass a background check, take a physical, drug and alcohol screening test and meet any physical agility requirements applicable to the position for which I am applying. I hereby give my voluntary consent for a blood and/or urine sample to be collected from me and submitted for testing. I also consent to the release of the test results to the Town of Falkville for its use. I understand that any positive drug or alcohol result may preclude my employment.

I acknowledge that if I am hired I will be able to provide proof of identity and legal work authorization. I understand that I must be at least 19 years old to work for the Town of Falkville and that all positions with the Town of Falkville require at least a high school diploma or GED. I have reviewed the requirements for the job for which I am applying and I am able to perform tasks required by the position, or can do so with reasonable accommodation. **I understand that this application is current for up to 6 months and can only be used for the position listed on page 1.** If I wish to apply for other positions I understand that I must submit a separate application.

If employed by the Town of Falkville, I agree to review and abide by the Alabama Code of Ethics, 36-25-1 through 20, AL Code 1975 and policies and procedures of the Town of Falkville which include the Personnel Handbook, Safety Handbook and departmental procedures. I further understand that while in a probationary status, my employment can be terminated with or without cause, at any time, at the discretion of the Town of Falkville. **Neither this application nor any subsequent offer of employment will constitute an agreement or contract for employment for any specified period or definite duration.** I acknowledge and understand that no representative of the Town of Falkville other than the Mayor or the Town Council has any authority to enter into any agreement, oral or written, on behalf of the Town of Falkville for a term of employment or to make any assurance or promise of continued employment.

Signature _____ Date _____

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