

City of Fayette
203 Temple Ave N
Fayette, AL 35555
205-932-5367

Employment Application

An Equal Opportunity Employer

The policy of the City of Fayette prohibits any employment which in any way discriminates against any person, employee or applicant for employment with respect to compensation, terms, conditions or privileges of employment because of an individual's race, color, religion, national origin, marital status, eligibility for military service, sex, handicap or age as provided by law.

Personal Information

Last Name		First Name		Middle Initial	Date
Home Phone	Business Phone	Email Address		Social Security Number	
Permanent Address			City	State	Zip Code
Previous Address (if Current Address less than 5 years)					Drivers License Number

Are you a legal citizen of the United States? Yes No

If you are not a legal citizen of the United States, are you eligible to work in the U. S. and would you be able to provide necessary documents of proof of the legal right to work upon hire? Yes No

Are you under 18? Yes No If you are under 18 and still in high school, you may be required to provide a work permit upon hire.

Have you ever been convicted of a felony? Yes No

If yes, give date, place, offense, and outcome (Previous convictions do not necessarily disqualify an applicant from employment)

Employment Interest

Position Desired	Salary Desired	Date Available
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Have you been interviewed for another position here? Yes No

If so, when? _____ through _____

Education and Training

Indicate last level completed:

High School	College or University	Graduate School
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Additional education, vocational, professional, military, or other information you feel may be helpful to us in considering your application.

Employment History

Company Name _____ Street Address _____

_____ May we contact employer? Yes No

City _____ State _____ Zip Code _____ Phone Number _____

Job Title _____ Supervisor Name and Title _____

Reason for Leaving _____

Job Duties _____

Dates of Employment _____ to _____ Starting Rate of Pay _____ Ending Rate of Pay _____

Company Name _____ Street Address _____

_____ May we contact employer? Yes No

City _____ State _____ Zip Code _____ Phone Number _____

Job Title _____ Supervisor Name and Title _____

Reason for Leaving _____

Job Duties _____

Dates of Employment _____ to _____ Starting Rate of Pay _____ Ending Rate of Pay _____

Company Name _____ Street Address _____

_____ May we contact employer? Yes No

City _____ State _____ Zip Code _____ Phone Number _____

Job Title _____ Supervisor Name and Title _____

Reason for Leaving _____

Job Duties _____

Dates of Employment _____ to _____ Starting Rate of Pay _____ Ending Rate of Pay _____

References

- 1) _____
- 2) _____
- 3) _____

I understand that the Immigration Reform and Control Act of November 6, 1986 requires me to prove the legality of my residency of citizenship. I am also aware that the failure to provide such proof at the time of request may legally force my termination. I understand that nothing contained in this employment application or in the granting of an interview is intended to create a contract between me and the company for either employment or the provision of any benefits; and further understand that all persons employed by the City of Fayette are employees at-will and the city reserves the right to terminate any employee at any time with or without cause and with or without notice. To the best of my knowledge the information contained on this application is true.

Applicant Signature

Date