

Application for Employment

Onalaska Water & Gas Supply

1598 FM 3459
P.O. Box 2463
Onalaska, TX 77360-2463
936-646-5393

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any legally protected status.

(Please Print)

Position(s) applied for:	Date of application
--------------------------	---------------------

Last Name	First Name	Middle Name
Address (911) Number	Street	P.O. Box
	City	S tate
		ZIP
Telephone Number(s)	Social Security Number	

Best time to contact you at home is:_____ am/pm

If you are under 18 years of age, can you provide required proof of your eligibility to work?..... yes no

Have you ever filed an application with us before? yes no

If "yes" give the date _____

Have you ever been employed with us before? yes no

If "yes" give dates _____

Do any of your friends, other than spouse, work here? yes no

Are you currently employed? yes no

May we contact your present employer? yes no

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
Proof of citizenship or immigration status will be required upon employment yes no

Date Available for work ____/____/_____ What is your desired salary range? _____

Are you available to work: Full-time (please indicate 1 2 3 shift)
 Part-Time (please indicate mornings afternoons evenings)
 Temporary (please indicate dates available ____/____/_____ to ____/____/_____)

Are you currently on "lay-off" status and subject to recall? yes no

Can you travel if a job requires it? yes no

Have you been convicted of a felony or misdemeanor in the past five years? yes no

(A conviction record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.)

Employment Experience (list the last ten years of employment, if you need more room continue on a separate sheet of paper.)

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer	Dates Employed From To	Work Performed
Address	Hourly Rate/Salary Starting Final	
Telephone Number(s)		
Job Title Supervisor		
Reason for leaving		
Employer	Dates Employed From To	Work Performed
Address	Hourly Rate/Salary Starting Final	
Telephone Number(s)		
Job Title Supervisor		
Reason for leaving		
Employer	Dates Employed From To	Work Performed
Address	Hourly Rate/Salary Starting Final	
Telephone Number(s)		
Job Title Supervisor		
Reason for leaving		
Employer	Dates Employed From To	Work Performed
Address	Hourly Rate/Salary Starting Final	
Telephone Number(s)		
Job Title Supervisor		
Reason for leaving		

Additional Information.

List professional, trade, business or civic activities and offices held. *You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.*

Other Qualifications Summarize special job-related skills and qualifications acquired from employment or other experience:

List Certificates Earned:

State any additional information you feel may be helpful to us in considering your application:

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such job or occupation has been given ___ YES ___ NO

1. Are you current with court ordered child support payments ___ YES ___ NO If yes, where _____
2. Are you currently under indictment, facing pending civil or criminal litigation, under investigation by a grand jury in any jurisdiction? ___ YES ___ NO. If "yes" explain on a separate sheet of paper and attach.
3. Have you ever been convicted of a felony or misdemeanor ___ YES ___ NO. If "yes" explain on a separate sheet of paper and attach.
4. Attach a copy of your birth certificate, social security card,
5. List any alias names, nick names, maiden names or past married names you have ever used. _____

References:

1.	_____ () _____
(Name)	Phone #
(Address)	
2.	_____ () _____
(Name)	Phone #
(Address)	
3.	_____ () _____
(Name)	Phone #
(Address)	

Applicants Statement & Authorization to Release Information

I certify that the answers given herein are true and complete. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of 60 days. Any applicant wishing to be considered beyond this time period should inquire whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

Signature of applicant

Date

Authorization to Release Information

I hereby authorize the Onalaska Water & Gas Supply through its employees or assigns to contact any and all former employers, references, educational institutions, State of Texas data bases and TCLOSE for verification of any and all facts put forth by me in this application, including my driving records and criminal history.

Further I authorize those individuals, organizations and/or businesses contacted to release any information requested by the City of Onalaska for the purpose of evaluation in considering my application for employment.

I request that MY CURRENT EMPLOYER _____ not be contacted until such time as a bonafide offer of employment is likely since I have not notified them of my intention to change employment at this time,

Signed _____ Date _____

Printed Name _____

Application Instructions

Please PRINT all entries with special care to phone numbers for former employers and references.

List all employers and add additional sheets to furnish a minimum 10 year employment history, explain any gaps of more than 90 days and/or list full time educational institutions you were attending.

Under additional information and specialized skills list any items that you consider beneficial to your proposed employment, be specific.

For the purpose of verifying driving and criminal background please list the following:

Any alias' you have used _____

TDL # _____ Exp date _____

SS # _____

For Personnel Department Use Only

Arrange Interview Yes No Interviewed By _____ Date _____

Remarks _____

Employed Yes No Date of Employment _____

Job Title _____ Hourly Rate/ Salary _____ Department _____

By _____

Name and Title

Date