



# Application for Employment

One Troyan Drive, Meadows Place, TX 77477  
281-983-2950 Fax: 281-983-2940

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone No: \_\_\_\_\_ Email \_\_\_\_\_

**You will be contacted via this email to schedule an interview.**

Social Security No: \_\_\_\_\_ Driver's License No.: \_\_\_\_\_ State of Issuance: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever been arrested? YES  NO  If yes, explain: \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO  If yes, explain: \_\_\_\_\_

Have you had a DWI in the past 5 years? YES  NO

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

## Certificates & Licenses

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**References**

**Please list three professional references.**

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Previous Employment (10 Years- Use Additional Sheet if Necessary)**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

## Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**Importance of Honesty:** The City of Meadows Place is seeking applicants who demonstrate certain characteristics. Honesty is the most important characteristic you must demonstrate. It is extremely important that you are completely honest in all of your answers. You may think that something you have done will disqualify you from further consideration. It may or may not. What will certainly disqualify you is lying or distorting the truth. For example: An arrest (either when you were a juvenile or as an adult) may or may not disqualify you. Lying about the arrest, however, will disqualify you from further consideration.

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

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



## **Authorization to Release Criminal History & Personal Information**

To Whom It May Concern:

I, \_\_\_\_\_, give my consent for the City of Meadows Place (City) to obtain criminal history information related to my application. I understand that criminal history information includes any criminal conviction records for deferred adjudication, misdemeanor or felony offenses at age seventeen (17) or older. Any such information will be used solely for employment, volunteer status or contracted services related consideration and will not for any other purpose.

I authorize, consent, and grant permission to any person or entity to release to the City or its agent(s) any and all information regarding my criminal history. I waive any and all claims that I may have with respect to providing such information. I understand that the City and its agents are not responsible for the accuracy or completeness of the information contained in such reports. I release the City and its agent(s) from any and all liability, claims, and lawsuits with respect to the information obtained from any or all the sources used by the City and its agent(s).

I also authorize a review and full disclosure of all records concerning myself to any duly authorized agent of the City of Meadows Place whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of records of educational institutions, employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me and the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, may have or have had an interest.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment with the City and the Meadows Place Police Department. I also certify that any person(s) who furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability that may be incurred as a result of furnishing such information.

I understand that the furnishing of such information to the City, its agent, employees and representatives is necessary to making a proper determination as to my ability to perform as an employee of the City. I do hereby release the City, its officers, employees and representatives from any and all claims, demands, suits, and liability of any kind that may or could result from any and all claims, demands, suits, and liability of any kind that may or could result from furnishing such information.

I understand that this authorization is not an offer of employment, volunteer status or contracted services by the City and that any false or misleading information I have provided may result in a refusal to hire, promote, reassign, or continue employment, volunteer status or contracted services.

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I also understand that this authorization is a continuing authorization and will remain valid until such time as I inform the City of Meadows Place, Texas in writing that I revoke this authorization.

Driver's License No: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Applicant/Parent/Guardian Date

Before me personally appeared \_\_\_\_\_ who stated this document and its intent was explained to him/her that he/she has full knowledge of its purpose and that he/she executed this instrument of his/her free will and accord.

Sworn to and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

SEAL \_\_\_\_\_  
Signature of Notary

My Commission Expires: \_\_\_\_\_