

# APPLICATION FOR EMPLOYMENT

The Town of Peralta, an Equal Employment Opportunity Employer

POST-OFFER, PRE-EMPLOYMENT DRUG SCREENING IS OUR POLICY

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Date\_\_\_\_\_

All Applicants will receive consideration for employment regardless of race, color, sex, religious, national origin, age, disability, or other protected status.

## PERSONAL DATA (Please Print)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How Long?

Home Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ How Long?

Are you eligible to work in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have a current valid driver's license? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

Driver's License # \_\_\_\_\_ Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_

Desired position(s): \_\_\_\_\_ Years of experience \_\_\_\_\_ Desired wages \$ \_\_\_\_\_

Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Temp-Position \_\_\_\_\_ Date available \_\_\_\_\_

Do you plan to continue your present job or seek secondary employment if hired? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_  
PERSONAL REFERENCES

List three personal references you have known for more than three years, who are not related or former employers.

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Name	Address	Phone	Occupation
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Name	Address	Phone	Occupation
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Name	Address	Phone	Occupation
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Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ SS#: \_\_\_\_\_

### EMPLOYMENT HISTORY

May we contact your present employer for references? \_\_\_\_\_ Yes \_\_\_\_\_ No

List all periods of employment and unemployment during the last ten years, beginning with your most recent employer. Please account for all dates. The complete address and telephone number must be included. This section must be completed even though you may have submitted a formal resume. If you need additional space, ask for an additional work history worksheet.

Firm name \_\_\_\_\_ Last position held \_\_\_\_\_

Address/PO Box Number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Responsibilities \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Reason for leaving \_\_\_\_\_ Rate of pay \$ \_\_\_\_\_

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Firm name \_\_\_\_\_ Last position held \_\_\_\_\_

Address/PO Box Number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Responsibilities \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_ Rate of Pay \$ \_\_\_\_\_

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Firm name \_\_\_\_\_ Last Position Held \_\_\_\_\_

Address/PO Box Number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Responsibilities \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_ Rate of Pay \$ \_\_\_\_\_

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Firm name \_\_\_\_\_ Last position held \_\_\_\_\_

Address/PO Box Number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Responsibilities \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Reason for leaving \_\_\_\_\_ Rate of pay \$ \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ SS#: \_\_\_\_\_

## EDUCATION

completed: 1 2 3 4 5 6 7 8 9 10 11 12  
**College Undergraduate**

GED \_\_\_\_\_ Yes \_\_\_\_\_ No

**Graduate** 1 2 3 4 Ph. D. \_\_\_\_\_ Yes \_\_\_\_\_ No

High School (s) \_\_\_\_\_ Collage (s) \_\_\_\_\_  
\_\_\_\_\_

Are you currently attending school? \_\_\_\_\_ Yes \_\_\_\_\_ No

Major \_\_\_\_\_

If yes, \_\_\_\_\_ part-time \_\_\_\_\_ full time

Degree (s) \_\_\_\_\_

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List any special skills, talents, proficiencies acquired during military, formal or vocational studies; i.e. computer, software, customer service.

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List any professional societies, licenses, and certifications; i.e. academic affiliations, CPR, first aid, and EMT.

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Do you (please x) \_\_\_\_\_ speak or \_\_\_\_\_ write a foreign language(s)? \_\_\_\_\_ Yes \_\_\_\_\_ No Which language(s)? \_\_\_\_\_

## GENERAL INFORMATION

Do you have relatives elected to office or employed with the town of Peralta \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, complete the following:

\_\_\_\_\_

Relationship

Department

How did you learn about the position for which you are applying? \_\_\_\_\_

If you are considered a finalist for the position for which you have applied, do you authorize the Town of Peralta to conduct a full criminal background check agree to release from liability and agree to hold harmless the Town of Peralta, New Mexico in this regard? \_\_\_\_\_ Yes \_\_\_\_\_ No

List any other names used during your employment history or schooling:

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Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ SS#: \_\_\_\_\_

## **APPLICATION CHECK LIST**

### **CONFIDENTIAL**

Please review and answer the following short list of questions. If you answer to any of the questions listed below, you will be required to provide detailed information/documentation to the Municipal Clerk prior to continuing. .

- Have you ever been convicted of a Felony? Yes \_\_\_\_\_ No \_\_\_\_\_
- Have you ever been convicted/charged with any criminal activity? Yes \_\_\_\_\_ No \_\_\_\_\_
- Have you ever been convicted of any theft related charge? Yes \_\_\_\_\_ No \_\_\_\_\_
- Do you possess a valid New Mexico driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_
- Have you been convicted of a DWI within the past five (5) years? Yes \_\_\_\_\_ No \_\_\_\_\_
- Are you currently pending any criminal charges, or a sentencing for a conviction? Yes \_\_\_\_\_ No \_\_\_\_\_
- To your knowledge, are there any outstanding criminal/Bench warrants active for your arrest? Yes \_\_\_\_\_ No \_\_\_\_\_.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ SS#: \_\_\_\_\_

**Failure to provide accurate and full disclosure of the questions listed above may result in delays or denial to obtain employment with the Town of Peralta**

1. Any misrepresentation or omission of facts in my application or any attachments to my application may be justification for refusal of employment or if employed, termination from employment.
2. It is my understanding that the Town of Peralta may complete a thorough investigation of my work history, criminal background, driving record, academic records and may verify all data given in my application, related papers or oral interviews is true and correct. I authorize such investigation and the giving and receiving of any information requested by the Town; and I release from liability any person giving or receiving any such information. I understand that falsification of data so given or other disqualifying information discovered as a result of this investigation may prevent my being hired, or if hired, may subject me to immediate termination.
3. I understand and agree that I may be required to take a medical examination, blood or urine test, at my expense at any time during my employment to determine if I am free of controlled substances. The Town of Peralta will, at its expense, require an initial drug screening test prior to employment. If such testing indicates an inability to perform these responsibilities, employment will be terminated or an offer of employment will be withdrawn. Failure to submit to such testing may result in the withdrawal of any employment offer or termination of employment.
4. I understand that due to the nature of this business, confidentiality is of extreme importance and that any violation of confidentiality is grounds for immediate termination.
5. In consideration of my employment, I agree to conform to all applicable rules, regulations and/or policies.
6. I understand that this document is an application for employment and no employment contract is being offered. I hereby understand and agree that my employment, both during and after any introduction period is at-will, and that nothing in this application or any other company document shall be deemed to create any contract of employment between me and the company, and that my employment can be terminated at any time by myself or the company for any or no cause. I understand that employment beyond the introduction period shall not result in any heightened expectation of continued employment. I understand and agree that any statements to the contrary, whether oral or written, are expressly disavowed and are not to be relied upon by me. I further understand that no representative of the Town, other than the Municipal Clerk or Peralta Hiring Board has any authority to enter into any agreement for employment for any specified period of time to make any agreement contrary to the foregoing.
7. In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 25 U.S.C. 2701-2721. The purpose of the requested information is to determine the eligibility of individuals to be hired. The information provided will be used by the Municipal Clerk, Council Members, or Mayor who have need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, Local or Law Enforcement and Regulatory Agencies when relevant to civil, criminal, or regulatory investigations or prosecutions or when, the information is relevant to the hiring or firing of an employee.  
Failure to consent to the disclosures indicated in this Notice will result in the Town being unable to hire you as an employee with the Town of Peralta.

I agree that the Town of Peralta may check any and all of the facts I have listed in my application for employment, including my references and my criminal record. A false statement on any part of your application maybe grounds for not hiring you or for firing you after you begin work. Also, you may be punished by fine or imprisonment. (18 U.S.C 1001,.)

I declare under penalty of perjury that the foregoing is true and correct. Executed \_\_\_\_\_ on, 20  
pursuant to 28 U.S.C. 1746.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Print Applicants Name \_\_\_\_\_ Initials \_\_\_\_\_

Witnessed by \_\_\_\_\_ Date \_\_\_\_\_