

# CITY OF BRYSON TEXAS

Employment Application

**APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

*City of*  
**BRYSON**

All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or veteran status, medical condition or handicap, or any other status protected by law. We are an Equal Opportunity Employer.

## APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?			
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			

## EDUCATION

High School	Address		
Years Completed	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College	Address		
Years Completed	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other	Address		
Years Completed	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

## INDICATE SPECIAL QUALIFICATIONS OR SKILLS

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## REFERENCES

*Please list three professional references.*

Full Name	Years Known
Address	Phone (     )
Full Name	Years Known
Address	Phone (     )
Full Name	Years Known
Address	Phone (     )

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## PREVIOUS EMPLOYMENT

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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			
<b>MILITARY SERVICE</b>			
Branch		From	To
Rank at Discharge		Type of Discharge	
If other than honorable, explain			

## DISCLAIMER AND SIGNATURE

The above information is true and complete to the best of my knowledge. Should I be employed by the City of Bryson, any misrepresentation or false statement contained herein may be considered cause for possible dismissal. City of Bryson has my permission to obtain all necessary information from the references I have listed, or any other sources, concerning my prior employment, personal history or credit standing and I release all parties from any possible damages resulting from disclosing such information with or without prior written notice to me. I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in any reports furnished to the City of Bryson.

Signature

Date