



CITY OF PINE BLUFF EMPLOYMENT APPLICATION

EMPLOYEE INFORMATION

Date: _____

Name: _____
Last First Middle

Address: _____
City State Zip

Telephone: _____ Alternate Telephone _____

Address: _____
City State Zip

Position(s) applied for: 1. _____ 2. _____ 3. _____

Have you ever been convicted of a felony? Yes No

(Conviction will not necessarily disqualify an applicant for employment) If yes, describe conditions _____

Have you ever received three (3) or more convictions for moving traffic violations during the last 36 months (3 years)? Yes No

Do you have any relatives employed with the City? Yes, Name _____ No

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	YRS OF STUDY	FIELD OF STUDY	GRADUATE/DEGREE
High School				
College				
Business or Trade School				
Professional School				

MILITARY

Are you a veteran? Yes No
If so, what branch? Air Force Army Marine Corps National Guard Navy

Duty/Specialized Training _____

Honorable Discharge Dishonorable Discharge Reason: _____

SKILLS AND QUALIFICATIONS

Other qualifications such as special skills, abilities or honors that should be considered:

Types of computers, software, and other equipment you are qualified to operate or repair:

Professional licenses, certifications or registrations:

Additional skills, including supervision skills, or information regarding the career/occupation you wish to bring to the employee's attention:

Typing Speed: _____ per minute (if applicable)

Do you have CDL? Yes No Class: _____

REFERENCES

List two personal references who are not relatives or former supervisors

Name Telephone Years Known

Name Telephone Years Known

WORK EXPERIENCE

List below, beginning with your most recent job, all present and past employment. Include paid, unpaid, etc. Attach additional pages if necessary. **A resume will not substitute for this application but may be attached.**

1	From _____ To _____ Job Title _____ Name of Employer _____ Name of Supervisor _____ Telephone _____ Ending Salary _____ Job Duties _____ Reason for Leaving: _____
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WORK EXPERIENCE CONTINUED

2	From _____ To _____ Job Title _____
	Name of Employer _____
	Name of Supervisor _____ Telephone _____
	Ending Salary _____
	Job Duties _____
	Reason for Leaving _____
3	From _____ To _____ Job Title _____
	Name of Employer _____
	Name of Supervisor _____ Telephone _____
	Ending Salary _____
	Job Duties _____
	Reason for Leaving _____

May we contact your present employer: Yes No

I certify that the information set forth in my application for employment is true and complete to the best of my knowledge. I authorize the City of Pine Bluff to make such investigations and inquiries of my personal and employment history and other related matters as may be necessary in arriving at an employment decision. I hereby release all employers, schools and/or persons from all liability in responding to inquiries in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) shall be considered sufficient cause for dismissal. I also understand that all employees of the City Pine Bluff are "at will" employees and that I will be required to abide by all rules and regulations of the City of Pine Bluff.

For all persons applying for positions with "Safety Sensitive" as identified by the City of Pine Bluff's Drug and Alcohol Policy, participation in the City's Drug and Alcohol testing program is mandated by 49 CFR Parts 653,654 and 40 of the Federal Government, Department of Transportation and/or the Federal Transit Administration. It is further understood that participation in the City's Drug and Alcohol testing program is a condition of employment.

My signature below indicates that I understand the above information.

Signature of Applicant

Date

CONSENT FOR CRIMINAL BACKGROUND CHECK

Personal Information:

Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip: _____

Social Security No.: - - Date of Birth: _____

Driver's License No.: _____ State DL Issued In: _____

Maiden or Other Name(s) Used:

Name: _____
Last First Middle

Name: _____
Last First Middle

I hereby give my permission for the City of Pine Bluff to obtain information relating to my criminal history through the Pine Bluff Police Department, the District Courts of Jefferson County, the State and Nation. The criminal history record may include arrest and conviction data as well as plea bargains and deferred adjudications. I understand that this information will be used, in part, to determine my employment eligibility with the City of Pine Bluff.

Signature of Applicant

Date

**ACKNOWLEDGMENT, AUTHORIZATION AND CONSENT FOR EMPLOYER TO OBTAIN A
CONSUMER REPORT AND/OR INVESTIGATIVE REPORT FOR EMPLOYMENT PURPOSES**

I acknowledge receipt of the Disclosure Regarding Employer's Intent to Obtain My Consumer Report and/or Investigative Report for Employment Purposes and A Summary of Your Rights Under the Fair Credit Reporting Act. I further certify that I have read and understand both of those documents. By affixing my signature below, and intending to be legally bound thereby, I hereby authorize the Employer the City of Pine Bluff, to obtain my "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and throughout my employment if applicable, for purposes of my employment, promotion or continued retention.

I acknowledge and consent that in conjunction with my application for employment, Employer will use the services of an outside agency to research and verify the information that I have provided on my application for employment including my personal background, character, professional standing, work history and qualifications. This agency will provide a report to Employer. The Employer uses VeriFirst Background Screening, LLC, a consumer-reporting agency, to perform background verifications, and to obtain Consumer Reports and Investigative Consumer Reports.

VeriFirst Background Screening, LLC will utilize various sources of information it deems appropriate including but not limited to: Credit Reporting Agencies, Worker Compensation records, Department of Motor Vehicle records, criminal conviction records, current and former employers, military records, education records, and professional and personal references. I request, authorize, and consent to the release and disclosure of any and all information including but not limited to the information identified above to the Employer and VeriFirst, Background Screening, LLC. I further request, authorize and consent to the procurement of a Consumer Report by Employer and VeriFirst Background Screening, LLC as part of the Employer's hiring and background investigation.

I further acknowledge and agree that by affixing my legal signature below and intending to be legally bound thereby, that I am signing the herein Authorization Form directing the Employer and VeriFirst Background Screening, LLC to obtain my consumer report and/or investigative report for employment purposes. I further certify that:

I have received and read the Disclosure Regarding Employer's Intent to Obtain My Consumer Report and/or Investigative Report for Employment Purposes as well as the document, " A Summary of Your Rights Under the Fair Credit Reporting Act", and if a California resident/applicant, "the Summary of Your rights Under the Provision of California Civil Code § 1786.22.

Signature of Applicant and/or Employee: _____

Today's Date: _____

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 Last First Middle

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Signature of Applicant

Date