

City of Eudora, AR

Phone(870) 355 4436

239 SOUTH MAIN STREET
EUDORA, CHICOT COUNTY, ARKANSAS 71640

Fax 870 355 4003

EMPLOYMENT APPLICATION

NOTE: The City of Eudora, AR is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin.

PERSONAL INFORMATION

Date: _____ Social Security Number _____

Name: _____
Last
First
Middle

Present Address: _____
Street
City
State
Zip

Permanent Address: _____
Street
City
State
Zip

Phone: _____

Referred By: _____ Are you 18 years of age or older? Yes No

EMPLOYMENT DESIRED

Position _____ Date you Can Start _____ Salary Desired _____

Are you Employed Now Yes No If so may we inquire of Your Present Employer? Yes No

Ever Applied to this City Before: Yes No Position _____ When _____

EDUCATION

Name and Location of School	Last Year Completed	Did you Graduate?	Subjects Studied Degree(s) Received
Grammar School _____	_____	Yes _____ No _____	_____
High School _____	_____	Yes _____ No _____	_____
College _____	_____	Yes _____ No _____	_____
Trade, Business or Correspondence School _____	_____	Yes _____ No _____	_____

GENERAL

Subjects of Special Study or Research _____

Job Related Skills (Typing, driver's license, computer programs etc.) _____

Activities other than Religious (Civic, Athletic, etc.) _____

EXCLUDE Organizations, the Name or Character of which indicates the Race, Sex, Color or Nation Origin of its members.

FORMER EMPLOYERS List below your last four employers, starting with the last one first

Date Month and Year	Name and Address of Employer	Salary Upon Leaving	Position	Reason For Leaving
From To				
From To				
From To				
From To				

REFERENCES List below three (3) persons not related to you, whom you have known for at least 1 year.

Name	Address	Position	Years Acquainted
1.			
2.			
3.			

If you are to be hired by the City of Eudora, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identify and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statements, omissions, or misrepresentation of this application is sufficient cause fore refusal to hire, or dismissal if I have been employed, no matter when discovered by the City of Eudora.

I understand that any employment is condition on a background check. I authorize the City of Eudora to thoroughly investigate all statements contained in my application, or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the City of Eudora, without giving me prior notice of such disclosure. In addition, I release the City of Eudora, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand agree that if am hired, my employment will be "at Will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the City of Eudora. No promises regarding employment has been made to me, and I understand that no such promise or guarantee is binding upon the City of Eudora unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the City of Eudora and as permitted by State of Arkansas Law. I consent to such examinations and tests, and I request that the examining doctor disclose to the City of Eudora the results of the examination, which results shall remain confidential upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by the City of Eudora Drug and Alcohol Policy.

I understand that filing out this form does not indicate there is a position open and does not obligate the City of Eudora to hire. If hired, I agree to abide by all the City Of Eudora, AR work rules, policies and procedures. The City of Eudora retains the right to revise its policies or procedures, in whole or in part at any time.

Date _____ Signature _____