



TOWN OF HICKORY CREEK

Employment Application

1075 Ronald Reagan Avenue • Hickory Creek, TX 75065
 (940) 497-2528 voice • (940) 497-3531 fax • www.hickorycreek-tx.gov

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Drivers License #:	
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

Are you 18 years old or older?

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

Any Specific Skills Relating to Position, Special Licenses, etc?

REFERENCES (PLEASE LIST THREE PROFESSIONAL REFERENCES)	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

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"/> Full Time <input type="checkbox"/> or Part-Time <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"/> Full Time <input type="checkbox"/> or Part-Time <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"/> Full Time <input type="checkbox"/> or Part-Time <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

- "I certify the facts contained in this application are true and complete to the best of my knowledge and understand if employed, falsified statements on this application shall be grounds for dismissal.
- I authorize investigation of all statements contained herein and the prior employers listed above to release to you all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.
- I understand and agree, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice."

Signature	Date
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APPLICANT WAIVER

Before signing this application, please read the following waiver carefully.

1. I have read and understand the position announcement for the position for which I am applying and certify that the answers given in this application are true and complete to the best of my knowledge. I understand that ***incomplete*** or ***inaccurate*** information may result in disqualification of this application.
2. I understand the employment process may include all or some of the following activities and consent to same: a) verification of possession of valid driver's license; b) review of my driving record which is on file with appropriate law enforcement agencies; c) verification of work history; d) a criminal history background check; and, e) a medical physical for certain positions.
3. I authorize all current and previous employers to release job related information upon the written request of the Town of Hickory Creek and any agent on its behalf. However, I understand if I have answered "no" to the question "May we inquire of your present employer?" that contact with the employer will not be made without my specific authorization.
4. I authorize the Town of Hickory Creek and any agent on its behalf to verify all job-related information on this application to determine my qualifications for the position for which I am applying. Moreover, I hereby release the Town of Hickory Creek and any agent on its behalf from all liability of whatsoever nature by reason of requesting such information from any person.
5. I understand that if employed, ***false statements*** or ***omissions*** on this application or any other material required for employment shall be considered sufficient cause for dismissal.
6. I understand that my employment and compensation can be terminated at any time without cause, and with or without notice at any time, at the option of the Town of Hickory Creek. I understand that no one has authority to promise permanent employment or employment for a definite period of time. I understand that the Town of Hickory Creek is an "at-will" employer and that either party for any reason not expressly prohibited by state law can terminate the employment relationship at any time.

I, (Print Name) _____, understand that by signing this application I am granting the Town of Hickory Creek, through its officers, agents and administrative staff, permission to conduct a third-party background check. A link will be sent to your email address to complete an E-Release Form.

SIGNATURE _____ DATE SIGNED _____

PLEASE RETURN THIS COMPLETED APPLICATION TO:

TOWN OF HICKORY CREEK, 1075 Ronald Reagan Avenue, Hickory Creek, Texas 75065.