



# CITY OF FARMERSVILLE

909 W. VISALIA ROAD  
 FARMERSVILLE, CA 93223  
 Ph. (559) 747-0458 Fx. (559) 747-6724  
[www.cityoffarmersville-ca.gov](http://www.cityoffarmersville-ca.gov)

## DEPARTMENT USE ONLY

RECEIVED: \_\_\_\_\_  
 ACCEPT: \_\_\_\_\_  
 LATE: \_\_\_\_\_  
 NO: \_\_\_\_\_  
 INTERVIEW DATE: \_\_\_\_\_

**PLEASE PRINT WITH BLUE INK OR TYPE**

Position applying for: \_\_\_\_\_ Date: \_\_\_\_\_

Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Social Security Number \_\_\_\_\_  
 Address: \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Other Phone \_\_\_\_\_  
 Have you ever worked for the City of Farmersville? Yes No Department: \_\_\_\_\_

If YES to the above question, please list the dates. \_\_\_\_\_ - \_\_\_\_\_

Are you a citizen of the United States? Yes No  
 If not, Do you have a work permit from the U.S. Immigration and Naturalization Service? Yes No

Permit Number: \_\_\_\_\_ (Proof Required)

Type of Employment Desired? Full Time Part Time Temporary Seasonal Volunteer

### EDUCATION

High School Graduate? Yes No High School Equivalency? Yes No  
 If NO, check the highest year completed? 1 2 3 4 5 6 7 8 9 10 11 12

Type of School	Name of School	City	Years Completed	Degree/Certification
High School				
College or University				
Graduate School				
Business School				
Trade School				

Professional License or Certificate \_\_\_\_\_ Type \_\_\_\_\_ Certificate # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Office Skills: Typing Speed \_\_\_\_\_ wpm Computer \_\_\_\_\_ Microsoft Office \_\_\_\_\_  
 Shorthand \_\_\_\_\_ Other: \_\_\_\_\_

Have you ever been convicted of any violation of law? (excluding traffic tickets) Yes No

If YES, please explain: \_\_\_\_\_  
 NOTE: A conviction does not necessarily bar employment. Each case shall be given individual consideration.

Has your Driver's License ever been Suspended or Revoked? Yes No

If YES, please explain: \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State Issued: \_\_\_\_\_ Expiration Date \_\_\_\_\_

Are you related to any person employed by the City of Farmersville? Yes No

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Department \_\_\_\_\_

Were you ever discharged (fired) or forced to resign from any positions? Yes No

If YES, please explain: \_\_\_\_\_



# CITY OF FARMERSVILLE

## APPLICATION FOR EMPLOYMENT

### EMPLOYMENT HISTORY

Starting with the most recent or present experience, please provide the following information for all employment during the past 10 years. You may attach a resume or a supplemental sheet to include additional information, but this section must be completed. Include military service and volunteer employment if applicable.

Employer:	_____	From:	_____	to	_____
Address:	_____	City:	_____	Zip:	_____
Telephone:	_____				
Job Title:	_____	Job Duties:	_____		
Salary:	start	_____	ending	_____	
Reason for leaving:	_____				

Employer:	_____	From:	_____	to	_____
Address:	_____	City:	_____	Zip:	_____
Telephone:	_____				
Job Title:	_____	Job Duties:	_____		
Salary:	start	_____	ending	_____	
Reason for leaving:	_____				

Employer:	_____	From:	_____	to	_____
Address:	_____	City:	_____	Zip:	_____
Telephone:	_____				
Job Title:	_____	Job Duties:	_____		
Salary:	start	_____	ending	_____	
Reason for leaving:	_____				

Employer:	_____	From:	_____	to	_____
Address:	_____	City:	_____	Zip:	_____
Telephone:	_____				
Job Title:	_____	Job Duties:	_____		
Salary:	start	_____	ending	_____	
Reason for leaving:	_____				

### CERTIFICATION OF APPLICANT (Carefully read before signing)

I certify that all statements made in this application and attachments are true and complete to the best of my knowledge and that any misstatement of material fact may subject me to disqualification or dismissal. I also agree to allow the City of Farmersville to determine my competence for certain positions in the fire or police departments or in departments where funds are involved, by obtaining credit, criminal and other job related information about me. I also understand that if such checks are involved, I may be informed of their contents by submitting a written request and that I have the right to respond to any finding which I believe to be incorrect.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_



# CITY OF FARMERSVILLE

## APPLICATION FOR EMPLOYMENT

### SUPPLEMENTAL QUESTIONNAIRE

The information requested below will be used for statistical purposes only. It will enable the Human Resources Division to evaluate City selection processes for compliance with the federal and state equal employment opportunity laws. This information is requested on a voluntary basis and will not be retained as part of your application. If you have any questions regarding this request, please contact the Human Resources Division. Your application will be processed whether or not you complete these questions. Thank you for your assistance.

Name: \_\_\_\_\_

Your sex:            Male                      Female

#### ETHNIC CATEGORY:

- ASIAN            The category "Asian" includes Asian-Americans and persons of Japanese, Chinese, Korean, Pacific Islanders and Vietnamese descent.
- BLACK           The category "Black" includes Blacks, African-Americans, persons of Jamaican, Trinidadian and West Indian descents.
- FILIPINO        The category "Filipino" includes all Filipino ancestry or ethnic origin.
- HISPANIC        The category "Hispanic" includes Mexican, Chicano, Latino, and all persons of Puerto Rican, Cuban, Central or South American or Spanish ancestry or ethnic origin.
- NATIVE AMERICAN    The category "Native American" includes persons who identify themselves as an American Indian, or are known as such, by virtue of tribal associations, including Alaskan Native.
- WHITE          The category "White" includes Caucasians, Anglo-Saxons, Europeans, and persons of Indo-European, North African or Middle Eastern ancestry or ethnic origin.
- OTHER (Please specify) \_\_\_\_\_

#### JOB SOURCE INFORMATION:

Please indicate where you learned of this job vacancy:

Interest Card Received/Walk-in to Human Resources Division

Newspaper (Please specify) \_\_\_\_\_

City of Farmersville web site

Internet bulletin board (Please specify) \_\_\_\_\_

Job Flyer Posted at Another Agency

State Employment Office

Professional Journal or Publication (Please specify) \_\_\_\_\_

College Placement Service

Friend or Relative

Other (Please specify) \_\_\_\_\_