



# City of Dilley

## CITY OF DILLEY APPLICATION FOR EMPLOYMENT

(PLEASE PRINT)

### PERSONAL INFORMATION

Position Applying for: \_\_\_\_\_ Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

How did you learn about us? \_\_\_\_\_

I certify that I am a U.S. citizen, permanent resident, or a foreign national with authorization to work in the United States? Yes [  ] No [  ]

Are you at least 18 years of age and can you provide required proof of your eligibility to work? Yes [  ] No [  ]

Have you ever been employed with the City of Dilley before? Yes [  ] No [  ]  
If so, when? (Give dates) From: \_\_\_\_\_ To: \_\_\_\_\_

Are you currently employed? Yes [  ] No [  ]  
If so, may we contact your current employer? Yes [  ] No [  ]

Have you ever served in the Military? Yes [  ] No [  ]  
If so, when? \_\_\_\_\_

Do you have a valid driver's license? Yes [  ] No [  ]  
If so, what type: Class: A \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_ CDL \_\_\_\_\_

Do any of your friends or relatives work with the City of Dilley or sit on the Council? Yes [  ] No [  ]  
If so, please list names: \_\_\_\_\_

P.O. Box 230 \* 116 E. Miller St. \* Dilley, Tx. 78014  
Phone: 830-965-1624 \* Fax: 830-965-1920 \* Email: [ryanez@cityofdilleytx.com](mailto:ryanez@cityofdilleytx.com)

CITY OF DILLEY IS AN EQUAL EMPLOYMENT OPPORTUNITY

## EDUCATION

School/Location	Yrs. Attended	Degree received	Major

**Certifications (if applicable):**

## EMPLOYMENT

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Pay Rate: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Duties Performed: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
May we contact them:      Yes [    ]      No [    ]

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Pay Rate: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Duties Performed: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
May we contact them:      Yes [    ]      No [    ]

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Pay Rate: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Duties Performed: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
May we contact them:      Yes [    ]      No [    ]

**REFERENCES**

<b>Name</b>	<b>Title</b>	<b>Company</b>	<b>Phone</b>

**Applicant Statement**

I certify that all the answers and information given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of my employment, I understand that false and/or misleading information given in my application or interview (s) may result in immediate discharge. I also understand that I am required to abide by all rules and regulations of the employer.

I further understand that if I am offered a position that I will be required to take a drug test and complete a Criminal History Background Check.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date