

City of La Vernia 102 E. Chihuahua St.

La Vernia, Texas 78121

The City of La Vernia is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Employment Application				Date of Application:				
		Applicant	Inform	ation				
Full Name:	Last	First			<i>M.I.</i>	.O.B.:		
Address:								
	Street Address					Apartment/Unit #		
	City				State	ZIP Code		
Phone:			Email_					
Date Availa	ble:	Social Security No.:_			Desired S	Salary: <u>\$</u>		
Position Ap	plied for:							
Are you a ci	itizen of the United Stat	YES NO es?	If no, a	are you	authorized to wor	YES k in the U.S.? □	NO	
Have you e	ver worked for this com	YES NO pany? □ □	If yes,	when?_				
Have you e	ver been convicted of a	YES NO felony?						
If yes, expla	ain:							
		Edu	ıcation					
High Schoo	ıl:	Addres	s:					
From:	To:	Did you graduate	YES e? 🗆	NO	Diploma::			
College:		Addres	s:					
From:	To:	Did you graduate	YES e? 🗆	NO	Degree:			
Other:		Addres	s:					
From:	To:	Did you graduate	YES	NO	Degree:			

	Refer	ences				
Please list three pr	rofessional references (this excludes fa	amily memi	bers)			
Full Name:				Relationship:		
Company:				Phone:		
Address:						
Full Name:				Relationship:		
Componi				Phone:		
Address:						
Full Name:				Relationship:		
Company:				Phone:		
Address:						
	Previous E	mployme	ent			
Company:				Phone:		
Address:				Supervisor:		
Job Title:	Starting S	Ending Salary: \$				
Responsibilities:						
From:	To:	To: Reason for Leaving:				
May we contact you	ur previous supervisor for a reference?	YES	NO			
				Phone:		
Address:				Supervisor:		
Job Title:	Starting S	Salary: \$		Ending Salary:		
Responsibilities:						
From:	To:	Reason fo	or Leaving:			
May we contact you	ur previous supervisor for a reference?	YES	NO			
				Phone:		
Address:				Supervisor:		
Job Title:	Starting S	Ending Salary:\$				

Responsibilities:							
From: To:	Reason for Leaving:						
May we contact your previous supervisor for a reference?	YES	NO					
Military Service							
Branch:		From:	To:				
Rank at Discharge:	Type of Discharge:						
If other than honorable, explain:							
Disclaimer and Signature							
I certify that my answers are true and complete to the best of my knowledge.							
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.							
Signature:			Date:				