



Application for Employment

The City of Socorro is an Equal Opportunity Employer.

Employees of the City and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age. As a means of accommodation to persons with specific disabilities that prevent them from completing this application, confidential assistance in filling out this application may be obtained by calling the Human Resources department.

APPLICATION MUST BE FILLED OUT IN ITS ENTIRETY. AN INCOMPLETE APPLICATION WILL NOT BE CONSIDERED.

Date: _____

Name:	Position you are applying for:
Address, City, State, Zip:	Contact Number:
Email Address:	Second Contact Number:
Social Security Number:	Are you at least 18 years of Age? <input type="checkbox"/> Yes <input type="checkbox"/> No
Salary Expectations: \$	Position Status: Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
Date of Availability:	Have you ever applied for the City of Socorro? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to accept employment, which requires you to travel? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Prior Application: _____ N/A <input type="checkbox"/>
Do you have reliable transportation? <input type="checkbox"/> Yes <input type="checkbox"/> No	If offered employment, can you provide documentation for your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No

Do you have any relatives or in-laws currently employed with the City of Socorro? Yes No

If yes, please state the following: Name:

Relationship:

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodations? Yes No

Have you ever been convicted or pled guilty or no contest to, or entered into a pretrial diversion or other deferral program for a crime (felony or misdemeanor) other than a minor traffic violation?
(Note: Convictions for reckless driving and DUI are not considered minor traffic violations.) Yes No

If yes or unsure, explain.

(Not all convictions will bar employment. Each case will be reviewed on its own merit.)

Education

Do you have a high school diploma or a high school equivalency? Yes No

Please list the number of years of College or Vocational education you have acquired:

University or Institution:	Major or Specialty:	Hours Completed:	Degree Received:

Please list anticipated dates of completion for degree or educational program.

Degree or Educational Program:

Anticipated Date of Completion:

Professional References (Do not list family or friends)

Name:	Professional Relationship:	Contact Number:
Name:	Professional Relationship:	Contact Number:
Name:	Professional Relationship:	Contact Number:

Experience

Please list all paid, military, and voluntary experiences. Please start with the most recent employment.			
May we contact your present Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Employer:	Telephone:	Position:	Dates Employed:
Address:	Supervisor:	Duties:	Reason for Leaving:
Employer:	Telephone:	Position:	Dates Employed:
Address:	Supervisor:	Duties:	Reason for Leaving:
Employer:	Telephone:	Position:	Dates Employed:
Address:	Supervisor:	Duties:	Reason for Leaving:

Electronic Signatures: Electronically produced and/or reproduced signatures will be treated as originals.

Certificate & Release of Liability

I hereby certify that the information I have provided on this application and its attachments is true and correct to the best of my knowledge and that no attempt has been made by me to conceal any pertinent information. I understand that any error or omission of information may constitute grounds for denial of employment or subject me to termination at any time during my employment.

report is used in the employment process. This authorization, in the original or copy form, shall be valid for this and any future reports that may be requested. I understand that my employment is conditioned to the approval by the City of Socorro of the results of these investigations.

Print Name

Signature

Date

Consent & Authorization: Pre-Employment Drug Screening

The City of Socorro has adopted a drug-free workplace policy. The City requires all final external applicants to submit to a urinalysis for drugs and drug metabolic. The urinalysis will be conducted by an authorized testing facility, and you must authorize the release of the urinalysis report result to the City. These results will be used solely to evaluate your eligibility for employment with the City and will be kept confidential.

Refusal to sign this authorization or to submit to the urinalysis will render you ineligible for further employment consideration.

I, the undersigned have read and understand this consent and hereby authorize the release of the results of the urinalysis to the City of Socorro for the above stated purposes. I further understand that my employment is contingent upon the receipt of a negative (i.e. free of illegal or unlawful drug use) drug result. I will be provided a copy of this consent and release upon request.

Printed Name

Signature

Date

Authorization to Review Credit Report

This is to notify you that the City of Socorro will be obtaining a copy of your consumer credit report from one or more credit reporting agencies.

I, authorize the City of Socorro to obtain a copy of my consumer credit report from one or more credit reporting agencies.

Print Name

Signature

Date

Notification and Authorization to Conduct Background Investigation

I authorize the City of Socorro and its agents to investigate my background in connection with my application for employment and/or volunteer service. I understand that this investigation may include, but may not be limited to, my personal history, employment history, driving record, educational background, and any military or criminal records. I release the City of Socorro, all former and current employers, educational institutions and other persons or agencies providing information about me from all liability for damages arising from the furnishing of such information. This authorization, in original and copy form shall be valid for this and any further reports and updates that may be requested.

SUBMISSION OF THE FOLLOWING INFORMATION IS VOLUNTARY

Pursuant to federal regulations, we collect responses to the questions below for record keeping purposes. This information will NOT be kept with your application for employment. Federal law prohibits unlawful discrimination on the basis of race, color, sex, age, national origin, religion, or disability.

Position Applied for:

Date of Birth:

Please check the block for the racial or ethnic group which you identify:

- White (includes Arabian)
- Black (includes Jamaican, Bahamians and other Caribbean of African descent)
- Hispanic (includes Mexican, Puerto Rican, Central or South American or other Spanish Origin)
- Asian & Asian American (includes Pakistanis, Indians & Pacific Islanders)
- American Indians (includes Alaskans)

Please check the appropriate block: Male Female

How did you find out about the employment opportunity? Please specify: