SOUTHMAYD POLICE DEPARTMENT Employment Application



Applicant	 	
Date of Birth _	 	
Assigned to:	 	
Received:		

For questions email: citysecretary@southmaydtx.com or call (903) 868-9420

When complete please mail (with all requested attachments) to: Southmayd City Hall Amanda McGill P. O. Box 88 4525 Elementary Dr. Southmayd, Texas 76268

Applicant Information

Full Name:			Date:	
	Last	First	M.I.	
Address:				
	Street Address			Apartment/Unit #
	City		State	ZIP Code
Phone:		Email		
Date Availab	le:S	ocial Security No.:	Desired Salary:	<u>\$</u>
Position App	lied for:			
Are you a cit	izen of the United States?	YES NO	you authorized to work in th	YES NO
Have you eve	er worked for this company	? YES NO [] [] If yes, wh	en?	
Have you eve	er been convicted of a felon	YES NO	n?	
Do you have with us?	any family members emplo	oyed YES NO		
If yes, explain Education				
High School:		Address:		
From:		YES Did you graduate?	NO Diploma:	
College:		Address:		
From:	<i>To:</i>	YESDid you graduate?	NO Degree:	
Other:		Address:		
		YES Did you graduate?	NO Degree:	
Reference	es			

Please list three professional references.

Southmayd Police Department

Employment Application

Full Name:			<u> </u>	Relationship:	
Company:				Phone:	
Address:					
Full Name:				Relationship:	
Company:				Phone:	
Address:					
Address.					
Full Name:			1	Relationship:	
Company:			1	Phone:	
Address:					
Previous	Employment				
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting Salar	<i>y:</i> \$		Ending Salary:	\$
Responsibili	ties:				
From:	To: Reas	son for I a	eavina:		
Trom.	10,104				
May we cont	tact your previous supervisor for a reference?	YES			
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Stauting Calar			Ending Calamy	ć
Job Title:	Starting Salar	<u>y: ş</u>		_Enaing Salary:	<u>\$</u>
Responsibili	ties:				
From:	To: Reas	son for Le	eavina:		
		YES	NO		
May we cont	tact your previous supervisor for a reference?				
Company:				Phone:	

Southmayd Police	Department
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Employment Application

Address:				Supervisor:	
Job Title:	Star	rting Salary: <u>\$</u>		Ending Salary:	<u>\$</u>
Responsibilities:					
From:	<i>To:</i>	<u>Reason for</u>	Leaving:		
May we contact your previou Military Service	us supervisor for a reference?	YES	NO		
Branch:			From:		То:
Rank at Discharge:		Type of L)ischarge:		
If other than honorable, expl	ain:				
Disclaimer and Signa	ture				
I certify that my answers are	true and complete to the be	st of my knowledge	2.		
If this application leads to en my release.	nployment, I understand that	false or misleadin	g information	in my application o	r interview may result in
Signature:				Date:	