

Town of Eagar

22 W. 2nd St. PO Box 1300 Eagar AZ 85925 (928) 333-4128 (928) 333-5140 (fax)

APPLICATION FOR EMPLOYMENT

PLEASE **PRINT** CLEARLY

Name of Applicant	Phone	Number		
Mailing Address (City	State		Zip
Position applying for:		Temporary	Part Time	Full Time
Who referred you?		Rate of pay exp	ected?	
Have you worked for the Town of Eagar befo	re?	Dates: From	Month / Year	ToMonth / Year
Where?	Rate of Pay		Position	
Reason for Leaving				
Names of Relatives working here				
Are you currently employed?	If not, how lon	g since leaving last	employment?	
	EDUCA	TION		

Last school; attendedName		Addres	s
	GENER	RAL	
Have you ever been convicted of a felony? is not an automatic bar to employment – all ci	If yes, please e ircumstances will be cons	xplain fully <u>on a separate</u> sidered.	sheet of paper. Conviction of a crime
	EMPLOYMEN	Γ RECORD	
The U.S. Department of Transportation requires they must show commercial driver employment			
Start with last or current position, including	military experience.		
Company:		Supervisor:	
Address:		Phone	x <u></u>
Position Held:	From	To	Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	::
Position Held:	From	To	_Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	x <u> </u>
Position Held:			
Reason for leaving			
Company:		Supervisor:	
Address:		-	
Position Held:			
Reason for leaving			
Commonw		Companying	
Company:		-	
Address: Position Held:			
Reason for leaving			

EMPLOYMENT RECORD, CONTINUED

Signature of Applicant

Company:	Supervisor:		
Address:		Phon	e:
Position Held:	From	To	_Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phon	e:
Position Held:	From	To	Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	e:
Position Held:	From	To	Salary
Reason for leaving			
The Town of Eagar is an Equa	al Opportunity Employer. APPLICANT MUST I	READ AND SIGN	
any damages on account of furnishing	agents may investigate my backgrass of record or not, and I release eng such information. I understand am capable of performing tasks, where	ound to ascertain any and inployers and other persor that, as an applicant for a hich are pertinent to the ju	
I further certify that I am a genuine employment with the Town of Eaga		application is being subm	nitted solely for the purpose of seeking
It is also agreed and understood that may include and investigate Consuncharacteristics and mode of living.			have been told that this investigation general reputation, personal
I agree to furnish such additional int	ormation and complete such exam	ninations as may be requir	red to complete my employment file.
I also understand the misrepresentat	ion or omission of information or	facts may result in my rej	ection or dismissal.
If hired, I agree to abide by all the reand that all entries on it and information			is application was completed by me, e.

Date

DRIVER EXPERIENCE AND QUALIFICATIONAnswer the questions in this section <u>only</u> if applying for a driver position.

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Licenses:	1		T	_		
Drivers	State	License No.	Class	Endorsement(s)	1	Expiration Date
Licenses held						
in past 3 years						
MUST be						
shown						
A. Have y	ou ever been	denied a license, permit or pr	rivilege to operat	e a motor vehicle?	Yes	No
B. Has an	y license, per	mit or privilege ever been sus	spended or revok	ed?	Yes	No
C. Have y	ou ever been	disqualified for violations of	the Federal Moto	or Carrier Safety Regulation	ons? Yes	No
If you answered	l yes to A, B,	or C, please attach a statemer	nt giving details.			
Driving Exp	erience:					
		Type of Equipmer	nt	Dates	App	roximate
Class of equipm	nent	(Van, Tank, Flat, et				al Miles
Straight Truck						
Tractor and Sen	ni-Trailer					
Twin Trailers -	LVC's					
Other						
List states opera		g that will help you as a drive	er			
List driving awa	ards held and	who awards were presented b	ру			
Accident Re	view for pa	ast 3years (Attach sepa	rate sheet of p	paper if more space i	s needed):	
D.		Nature of accident	,	E + 122	-	
Dates	(Head-On, Rear-End, Overtur	n, etc.	Fatalities	<u> </u>	njuries
Last Accident						
Next Previous						
Next Previous						
Traffic Conv	victions and	d Forfeitures for the pa	st 3 years oth	ner than parking viol	ations:	
	Location	Date		Charge		Penalty

WORK RELATED EXPERIENCE AND QUALIFICATIONS

Water / Wastewater:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Trench Experience		
Shovel Experience		
Fixing or repairing broken		
lines under pressure		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Pressure Testing Lines		
Fittings Experience		
Manhole Installation		
Sewer Jet or Cleaning		

Roads:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Patching		
Culvert Installation		
Blading / Maintaining Roads		
Chipsealing		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Asphalt		
Other (Specify)		
Other (Specify)		
Other (Specify)		

Facilities:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Carpentry		
Plumbing		
Electrical		
Dry Wall		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Concrete (finishing,		
forming, etc.)		
Other (Specify)		
Other (Specify)		

Heavy Equipment:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Backhoe		
Front End Loader		
Skiploader / Gannon		
Blade / Grader		
Dozer		
Excavator		
Forklift		
Steel Wheel Roller		
Pneumatic Roller		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Street Sweeper		
Chip Box		
Air Compressor		
Cement Mixer		
Boom / Bucket Truck		
Platform		
Other (Specify)		
Other (Specify)		
Other (Specify)		

Fleet Maintenance Experience:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Drive Line Components		
Diesel Engine Tune-Up and		
Rebuild		
Gas Engine Tune –Up and		
Rebuild		
Tire Service		
Trailer Repair		
Air		
Conditioning		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Body Work		
Electrical		
Repair		
Frame and		
Wheel Alignment		
Brakes		
Cooling System		
Inspections		
General Car /repair		

WORK RELATED EXPERIENCE AND QUALIFICATIONS, CONTINUED

Shop Equipment:

experience in the following:	(Check)	Experience		(Class 1-)	Experience
	(Check)	Experience	experience in the following:	(Check)	Laperience
Electrical Diagnostic Equip.			Time Servicing Machine		
Sheet Metal Equipment			Wheel & Tire Balancing		
			Mach		
Frame & Axle Straightening			Tire Recapping Mold		
Equipment			Engine Dynamometer		
Engine Rebuilding			Chassis Dynamometer		
Diesel Injection Equipment			Magnetic Crack Defector		
Oxyacetylene Welder			Engine Analyzer		
Paint Spray Gun			Noise Measuring Equipment		
Air conditioning			Smoke Measuring		
C			Equipment		
Inspections			General Car Repair		
			T READ AND SIGN		
understood that the employer of employment history, whether any damages on account of fur may be asked to demonstrate t	EAD AND UNDER or his agents may invasame is of record or rnishing such inform that I am capable of	RSTAND ALL Covestigate my bacount, and I release that independent of the control	OF THIS EMPLOYMENT APPLI ekground to ascertain any and all it e employers and other persons nat and that, as an applicant for a post s, which are pertinent to the job. I	nformation of conce med herein from all ition with the Town	rn to my liability for of Eagar, I
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Years of

Formal Training

Signature of Applicant

Indicate training and

Formal Training

Date

Years of

Indicate training and