

City of Little Flock
1500 Little Flock Drive
Little Flock, AR 72756

APPLICATION FOR EMPLOYMENT

GENERAL INFORMATION

Last Name	First Name	M.I
Social Security #	Date	
Current Street Address		
City	State	Zip Code
Phone	E-Mail Address	
Driver's License Number	State Issued	Date you can Start Work
Are you 18 Years of Age or Older?	Employment Desired	Rate of Pay Expected
YES	Full Time	
NO	Part Time	
Position Applying For	Have you ever worked for the City of Little Flock before?	
	YES	
	NO	

Have you ever been convicted of a crime? (List all crimes including and which you were convicted, pled guilty to, pled "No Contest to, or pled to a lesser offense?)

EDUCATION (List all High Schools and Colleges Attended)

School Attended Did you Graduate Degree/Diploma

YES

NO

School Attended Did you Graduate Degree/Diploma

YES

NO

School Attended Did you Graduate Degree/Diploma

YES

NO

School Attended Did you Graduate Degree/Diploma

YES

NO

Special Skills and Qualifications (List any special skills and qualifications)

EMPLOYMENT HISTORY

(List below your employment history for the past 10 years. Account for ALL periods of time beginning with you most recent employer. Include part-time work, temporary work, military service and periods of unemployment. Continue on separate piece of paper if necessary.)

Employer Name

Dates of Employment From To

Address

City

State

Zip
Code

Department

Supervisor

Phone

E-Mail Address

Job Titles and Duties

Reason for Leaving

Employer Name

Dates of Employment

From

To

Address

City

State

Zip
Code

Department

Supervisor

Phone

E-Mail Address

Job Title and Duties

Reason for Leaving

Employer Name

Date of Employment

From

To

Address

City State Zip Code

Department Supervisor

Phone E-Mail Address

Job Title and Duties

Reason for Leaving

Employer Name

Dates of Employment From To

Street Address

City State Zip Code

Department Supervisor

Phone E-Mail Address

Job Title and Duties

Reason for Leaving

REFERENCES (Please list three references other than relatives or previous employers, whom you have known at least on year)

Name Phone Number

Address

Name Phone Number

Address

Name Phone Number

Address

PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION

I authorize the City of Little Flock to investigate all statements in this application and to secure any necessary information from my employers, references and academic institutions. I hereby release all of these employers, references, academic institutions and the City of Little Flock from and and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications and my suitability for employment with the City. I understand that any false or misleading statements will result in the rejection of this application or, if employed at the time of discovery, the termination of my employment. In the event of my employment with the City, I will comply with all the official policies and the City set forth in any City policy manual or the other communications distributed by the City.

In case of Emergency Notify: Phone Number

Signature of Applicant Date