

Dalhart Area Chamber of Commerce Employment Application Form

This application is to be completed by all applicants for any position!

Personal

Last Name _____ First Name _____ Middle Initial _____

Present Address _____ Social Security # _____

City _____ State _____ Zip _____ Date of Birth _____

Email _____ Marital Status _____

Home Phone (_____) _____ Work Phone (_____) _____

Occupation _____

Do you have a current driver's license? No Yes: License number _____ State _____

Have you ever been charged with, indicted or arrested for, or pled guilty to a criminal offense?
 No Yes If yes, please describe all arrests and convictions for the past five years.

Is there anything that would affect or interfere with your ability to work and fulfill the responsibilities of this position (i.e. other employment, physical limitations, emotional trauma, illnesses ... etc.)? No Yes If yes, please explain.

Work History

■ Company & Supervisor Name _____
Address _____ Phone (_____) _____
City/State/Zip _____
Type of Work _____ Dates of Employment _____

■ Company & Supervisor Name _____
Address _____ Phone (_____) _____
City/State/Zip _____
Type of Work _____ Dates of Employment _____

■ Company & Supervisor Name _____
Address _____ Phone (_____) _____
City/State/Zip _____
Type of Work _____ Dates of Employment _____

References

Personal References

Name & Address (City/State/Zip/Phone)

Applicant Statement (Please read and initial each statement.)

_____ The information contained in this application is correct to the best of my knowledge.

_____ I authorize the release to Dalhart Area Chamber of Commerce, information from law enforcement files concerning and history of criminal offenses for which I have been charged or convicted of.

_____ I authorize references listed in this application to provide information (including opinions) they may have regarding my character.

_____ I release all such references from any liability for furnishing such evaluations, provided they do so in good faith and without malice.

_____ I waive any right I may have to inspect references provided on my behalf.

_____ Should my application be accepted, I agree to be bound by the bylaws and policies of this organization.

_____ I further state that I have carefully read the foregoing release and know the content thereof and I sign this release as my own free act. This is a legally binding agreement which I have read and understand.

Applicant's Signature _____ Date _____

Witness _____ Date _____

For Official Use Only

Date of Interview _____ Interviewer _____

Recommendations _____

Follow up _____