

City of McGehee

P.O. Box 612
McGehee AR 71654
870-222-3160
Fax: 870-222-5729

Name: _____
Last First Middle

Social Security #: _____

Address: _____

Telephone #: _____

Are you over 18 years old? () yes () no

Are you legally eligible for U.S. employment? () yes () no

Position applying for: _____

Part time () Full time ()

If part time check days/hours available () Mon. () Tue. () Wed. () Thur. () Fri.

Date available to begin work: _____ Salary desired: \$ _____

Have you ever worked for us before? _____ If yes, when? _____

Indicate any special skills: _____

Have you ever been bonded in prior employment? _____

If yes, list names of employers: _____

Have you ever been convicted of a crime (excluding misdemeanors & traffic violations)
() Yes () No If yes, list convictions: _____

Are you physically capable of performing the duties of the position applied for? () yes () no

If no, explain: _____

Do you possess a valid operator's license from the State of Arkansas? () Yes () No

Do you possess an operator's license issued by any state other than Arkansas? () Yes () No

If yes, give state and number: _____

Was your license ever suspended or revoked? () Yes () No

If yes, state which and give reason: _____

Was your license restored? () Yes () No When? _____

Have you ever been refused an operator's license by any state? () Yes () No

Have your driving privileges ever been restricted? () Yes () No

If yes give details: _____

Name & location	Course of study	Years completed/graduation
Elementary		
High School		
College or Other		

Prior Employment (Start with most recent employer)

Employer: _____
 Phone: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Position: _____ From: _____ to _____
 Duties: _____
 Salary/Wages: _____
 Reason for leaving: _____

Employer: _____
 Phone: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Position: _____ From: _____ to _____
 Duties: _____
 Salary/Wages: _____
 Reason for leaving: _____

Personal References:

Name	Address	Years Known	Telephone

The above information is true and complete to the best of my knowledge. Should I become employed by this company, any misrepresentation or falsehood herein may be considered cause for possible dismissal. This Company has my permission to obtain all necessary information from the references listed concerning my prior employment, personal history or credit standing and I release all parties from any possible damages resulting from disclosing such information with or without prior written notice from me. I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in any report. I understand this application does not constitute any employment contract of any kind. I may resign such employment at any time and the Company may terminate my employment at any time at their discretion, with or without cause and with or without prior notice written or otherwise. **I understand that the City of McGehee is a drug free work place and I will be required to take a drug test.**

Signature of Applicant: _____

Date: _____

Please attach your resume to the application.