The City of Westover AL.
City Hall PO. Box 356
Westover Alabama 35185
205-678-3375

Employment Application

Applicant Information

Full Name: _____   Date: _____
Last   _First_   _M.I._

Address: _____
Street Address   _Apartment/Unit #_

_____
City   _State_   _ZIP Code_

Phone: _____   Email _____

Date Available: _____   Social Security No.: _____   Desired Salary:$ _____

Position Applied for: _____

Are you a citizen of the United States?   YES ☐   NO ☐   If no, are you authorized to work in the U.S.?   YES ☐   NO ☐

Have you ever been convicted of a felony?   YES ☐   NO ☐   If yes, explain: _____

_____

Drivers License**ID#** _____   **State:** _____   **Expiration Date:** _____

When are you available for work? _____

Education

High School: _____   Address: _____

From: _____   To: _____   Did you graduate?   YES ☐   NO ☐   Diploma: _____

College or Tech Training: _____   Address: _____

From: _____   To: _____   Did you graduate?   YES ☐   NO ☐   Degree: _____

References

Please list two professional references.

Full Name: _____ Relationship: _____

Email Address: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Email Address: _____ Phone: _____

Address: _____ _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:**$**_____ Ending Salary:**$**_____

Responsibilities: _____

From: _____ To:_____ Reason for Leaving:_____

May we contact your previous supervisor for a reference? YES ☐   NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:**$**_____ Ending Salary:**$**_____

Responsibilities: _____

From: _____ To:_____ Reason for Leaving:_____

May we contact your previous supervisor for a reference? YES ☐   NO ☐

Company: _____ Phone:_____

Address: _____ Supervisor:_____

Job Title: _____ Starting Salary:$_____ Ending Salary:$_____

Responsibilities: _____

From: _____ To:_____ Reason for Leaving:_____

May we contact your previous supervisor for a reference?
YES ☐   NO ☐

Military Service

Branch: _____ From:_____ To:_____

Rank at Discharge: _____ Type of Discharge:_____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

By signing this I acknowledge that I agree to a background check, and all other tests necessary for employment.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date:_____

For First Responders Only

Person to be notified in case of emergency: _____ Relationship:_____

Address:_____ Mobile Phone:_____ _____

Email:_____@_____

Height:_____ Weight:_____ JOB TITLE:_____ Rate of pay:_____

Applicant's signature acknowledging above information:_____