APPLICATION FOR EMPLOYMENT WITH CITY OF COWETA/COWETA PUBLIC WORKS AUTHORITY

Please complete all fields and return to hr@cityofcoweta-ok.gov

We are an equal opportunity employer **Personal Information Date** Name First Middle Present Address Street City State Mailing Address Street City State Zip Where can we reach you? Cell Phone Home Phone **EMPLOYMENT DESIRED Email Address:** Position applied for (must be specific) Date you can start Have you ever been employed by the City of Coweta/Coweta Public Works Authority in the past? If "yes", when Have you applied for employment with the City of Coweta/Coweta Public Works Authority within the past three years? Education Name and Location of School Did you graduate / Degree High School / GED College **Graduate School** Trade, Business, or Correspondence School GENERAL INFORMATION: Please state any special skills you have that reflect on this position. REFERENCES List below three persons Not Related to You, whom you have known at least three years. **Full Name** Address **Phone** Years Known 1 2. 3.

(continue on Other Side) **Human Resources Form** © City of Coweta (Continued, Page 2)

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Phone

Salary

Position

Reason for

Present & Former Employment List below your last six employers, starting with the most recent.

Name &Address

Date Month

& Year			Upon		Leaving
Г			Leaving		
From:					
To: From:					
To: From:					
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To:					
From					
To:					
10.					
Applicant must Initial each statement below and sign at the bottom.					
I understand that before I can be hired by the City of Coweta/Coweta Public Works Authority, I must provide proof of my					
identity and employment eligibility, by Homeland Security & 19 guidelines.					
I understand that if himed by the City of Cowete/Cowete Dublic Works Authority, my employment will be "at will of both					
I understand that if hired by the City of Coweta/Coweta Public Works Authority, my employment will be "at will of both parties" without stated terms or conditions and that the employment can be terminated by myself or by the City of Coweta at any					
time, with or without cause or prior notice by either party.					
many with our without enable of prior notice of civilizar party.					
I understand that I must state the exact job or job category that I am seeking and if I leave this space blank or is non					
	cation may not be reviewed or considere	d for employment.	[understand	that I must fill out	a separate application
for each position that I am applying for.					
I understand that this application will remain an file with the City of Cowete/Cowete Dublic Works Authority for three					
I understand that this application will remain on file with the City of Coweta/Coweta Public Works Authority for three years from the date it was accepted and after that date it will be destroyed unless I am hired by the City of Coweta/Coweta Public					
Works Authority. If you wish to reapply for employment a new application must be filled out after six months.					
I understand that an offer of employment is conditional upon a successful background check and successful drug screen and					
that false or misrepresentation of information on this application or documents submitted to the City of Coweta/Coweta Public					
Works Authority is grounds for termination.					
I understand and affirm that nothing contained in this application, conveyed during any interview, conversation, or					
correspondence is intended to create an employment agreement or contract with the City of Coweta/Coweta Public Works					
Authority. I understand & agree that no promises regarding employment can be made to me except by the City Manager, and I					
understand that no such promise or guarantee is binding upon the City of Coweta/Coweta Public Works Authority unless made in					
writing.					
I um douat	and and affirm that no affar of ampley	mont on he made	until I have a	ampleted and nos	and a nun amplayment
I understand and affirm that no offer of employment can be made until I have completed and passed a pre-employment drug test, satisfied a successful background review and that I may be required to submit to a medical examination at any time					
deemed appropriate by the City of Coweta/Coweta Public Works Authority.					
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I understand and affirm that completing this application does not indicate there is a position open within the City and does					
not obligate the City of Coweta/Coweta Public Works Authority to hire. If hired, I agree to abide by all City of Coweta/Coweta					
	hority policies, rules, and procedures al				
Public Works Aut	nority retains the right to revise its polic	ies, rules, and proce	dures, in who	ie or in part, at an	y time.
I certify t	hat the facts contained in this application	ns (and accompanyi	ng resume if	any) are true and	complete to the best of
	understand that any false statement, of				
	dismissal if I have been employed, no				
Authority.			-		
G• /			D :		
Signature:			_ Date:		