

APPLICATION FOR EXAMINATION

Civil Service Board
500 Anniston Street
Weaver, AL 36277

Title of examination/position applying for _____

Would you consider a part-time position? _____

Name: _____ / _____
Last First Middle Social Security #

Address: _____
Street City State Zip Code

Legal Residence: _____
City State County

Home Phone: _____ Cell Phone: _____

Email Address: _____

How long have you lived there? _____ Are you a U.S. Citizen? _____

Date of Birth: _____ Place of Birth _____

Driver's License# _____ Issuing State _____

Have you ever been arrested and convicted of a Felony Offence? Yes _____ No _____

EDUCATION : Circle highest grade completed in school: 1 2 3 4 5 6 7 8 9 10 11 12

Name of School	From Month/Year	To Month/Year	Did you graduate?	Degree Date	Major
High School:					
Jr. College					

College					
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College					
Business					
Correspondence Course					

List any professional certificates or license: _____

List below courses included in your education which were particularly related to the duties of the position for which you are applying.

Subject: Semester Hours:	Subject: Semester Hours:
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Please List any other schools or certification you feel would be beneficial to the job you are applying for.

List three reliable persons, not relatives or employers, who know you well enough to give information about you.

Name	Address/Phone#	Occupation

3.Next Period of employment	Employment Period	Salary per Month	Reason for Leaving
Employer: _____ Address: _____ City/State: _____ Type of Business: _____ Your Position: _____ Supervisor: _____ Phone# _____ Duties: _____ _____	From: _____ Month/Year To: _____ Month/Year	Start: _____ End: _____	_____ _____ _____ _____ _____ _____
4.Next Period of employment	Employment Period	Salary per Month	Reason for Leaving
Employer: _____ Address: _____ City/State: _____ Type of Business: _____ Your Position: _____ Supervisor: _____ Phone# _____ Duties: _____ _____	From: _____ Month/Year To: _____ Month/Year	Start: _____ End: _____	_____ _____ _____ _____ _____ _____

Are you a relative to someone already employed with the City of Weaver or an elected official for the City of Weaver? Yes _____ No _____ relationship _____

The information given in this application and in the forthcoming interview is given of my own free will and accord, and is true and correct to the best of my knowledge and belief. This is my expressed permission for the City of Weaver to obtain a computerized criminal history, credit check and check my experience and qualifications for the position applied for. I understand the information given on this application and any other information obtained during an interview will become a permanent part of my record with the City of Weaver. Any false statement hereon or any withholding of requested information now or in the future will be sufficient cause for rejection or termination of my employment.

Applicant's signature _____ Date: _____

Revised 1/9/23 SH