



APPLICATION FOR EMPLOYMENT

Return Completed Applications to:
 City of Alamogordo Human Resources
 1376 E. 9th St.
 Alamogordo, NM 88310

Call: (575) 439-4399 | Fax: (575) 439-4367 | Website: www.ci.alamogordo.nm.us

PLEASE NOTE: You may submit a resume, but a resume is not a substitute for this application. Incomplete and/or unsigned applications will be rejected and therefore, not considered.

Please Type or Print Clearly in Ink

Application Date	Name (Last)	(First)	(Middle Initial)	Home Telephone
Address (Mailing Address)		(City)	(State)	(Zip)
E-Mail Address		Other Names Used (i.e. maiden name or previous married names)		
Driver's License (Number)	(State)	(Class)	CDL (Yes/No)	

Position Applying For	Will Accept:	Shift:
Are you legally eligible to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Day
If required, will you undergo a pre-employment physical? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Swing
If under 18, can you furnish a worker's permit? <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Temporary	<input type="checkbox"/> Graveyard
Salary Desired	<input type="checkbox"/> Rotating	
Date Available		
How did you hear about this position? <input type="checkbox"/> City Website <input type="checkbox"/> Newspaper <input type="checkbox"/> Referral <input type="checkbox"/> Other, please specify below		

Questions

Have you ever been employed with the City of Alamogordo? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, dates:	Department:
Are you related to any City employee or elected Official? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name:	Relationship:

THE CITY OF ALAMOGORDO IS AN EQUAL OPPORTUNITY EMPLOYER

NOTICE: BASED ON THE NEW MEXICO PUBLIC RECORDS ACT, ALL APPLICANT INFORMATION IS PUBLIC RECORD WITH THE EXCEPTION OF SPECIFIC INFORMATION EXCLUDED BY THE ACT.

For HR Office Use Only:		
<input type="checkbox"/> Received <input type="checkbox"/> Reviewed <input type="checkbox"/> Selected for Interview <input type="checkbox"/> Not Selected for Interview <input type="checkbox"/> Withdrew Application		
Notification History:	Email Log -	Call Log -
		Notes -

EMPLOYMENT HISTORY Check box if you do not have a work history

ALL RELATED EXPERIENCE AND EDUCATION REQUIRED FOR THIS POSITION MUST BE INCLUDED IN THE APPLICATION TO BE CONSIDERED.

List the most recent employment first. Be sure all your experience or employers related to this job are listed. Attach extra sheets of paper (if necessary). Explain any gaps in employment in the *Additional Information* section. You may submit a resume, but a resume is not a substitute for this application. Incomplete and/or unsigned applications will be rejected.

Employer	Telephone Number	From (Month/Year)
Address	Supervisor's Email	
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties		Hours Per Week
		Last Salary
		Supervisor's Name
Reason for Leaving		May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later

Employer	Telephone Number	From (Month/Year)
Address	Supervisor's Email	
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties		Hours Per Week
		Last Salary
		Supervisor's Name
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Employer	Telephone Number	From (Month/Year)
Address	Supervisor's Email	
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties		Hours Per Week
		Last Salary
		Supervisor's Name
Reason for Leaving		May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later

High School Graduate or General Education (GED) Test Passed? Yes No

If no, list the highest grade completed:

EDUCATION BACKGROUND *(most recent first)*

Name and Location	Dates Attended Month/Year	Credits Earned		Graduate	Degree & Year	Major or Subject
		Quarterly or Semester Hours	Other (Specify)			
	From			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To					
	From			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To					
Occupational License, Certificate or Registration		Number		Where Issued		Expiration Date

LANGUAGES *List all the languages read, written, or spoken fluently (including English)*

Read	Write	Speak

VETERAN INFORMATION *(most recent)*

Branch of Service	Date of Entry	Date of Discharge

SKILLS & QUALIFICATIONS

Summarize any special skills and qualifications acquired from employment or other skills or experiences that may qualify you to work with the City of Alamogordo.

	N/A	Beginner	Intermediate	Advanced
Computer Skills: Typing WPM _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Key	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Skills: Construction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Customer Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facility Maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Office/Clerical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landscaping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Summarize other skills, qualifications, and types of tools used (use additional sheets of paper, if needed):

Additional Information (use additional sheets of paper, if needed):

REFERENCES

(two professional references not already listed in employment history section and two personal references not related to you)

Name	Email Address	Phone	Best time to Call	Years Known

PLEASE READ & SIGN THE STATEMENT BELOW

(unsigned applications will not be considered)

The facts set forth in my application for employment are true and complete, to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. I authorize any of my previous employers, schools, or persons named as references to give any information regarding employment or educational record. I agree that the City of Alamogordo and my previous employers shall not be held liable in any respect if a job offer is not extended, is withdrawn, or my employment is terminated because of false statements, omissions or answers made by me on this application or the supplemental documents (i.e. resume, personal history statement, etc.) that may be reviewed with my application.

Note: It is hereby understood and agreed that if hired by the City of Alamogordo, I will be employed on a trial basis for a period six (6) months. One (1) year for Police and Fire Personnel. This probationary period does not apply to "at-will" employees.

Applicant Signature:

Date:

By my signature below, I _____, understand I may submit a resume, but a resume is not a substitute for this application. Incomplete and/or unsigned applications will be rejected and therefore, not considered.

Applicant Signature:

Date:

CRIMINAL ARRESTS, CREDIT HISTORY, & DRIVING RECORD

By my signature below, I _____, authorize the City of Alamogordo to obtain criminal arrests, credit history (if needed), and driving record information about me from law enforcement agencies, courts of law, and motor vehicle departments, of any state in which I reside or have resided.

Please list the names of all of the state(s) you have lived in as an adult:

E-VERIFY ACKNOWLEDGEMENT

By my signature below, I _____, acknowledge that I understand City of Alamogordo Participates in E-Verify and will provide the federal government with my Form I-9 information to confirm that I am authorized to work in the United States.

Applicant Signature:

Date:

DRUG SCREENING ACKNOWLEDGMENT & AGREEMENT

By my signature below, I _____, realize and understand that if considered for employment with the City of Alamogordo, I will be required to submit to, and successfully complete, a pre-employment drug screening test in the form of a urinalysis or blood test, as a condition of hire. The City of Alamogordo will bear the cost for this pre-employment drug screening.

My signature below also serves to acknowledge and agree to the fact that if I receive preliminary offer of employment with the City of Alamogordo and accept it, I will be subject to a drug screening test PRIOR to FINAL offer of employment. Successful completion of a drug screening is defined as test results showing no trace of drugs. If successful completion of a drug-screening is not obtained, I understand my offer of employment will be withdrawn.

Applicant Signature:

Date:

AUTHORIZATION FOR RELEASE OF CRIMINAL ARRESTS, CREDIT HISTORY, & DRIVING RECORD

I authorize the City of Alamogordo to obtain criminal arrests, credit history (if needed), and driving record information about me from law enforcement agencies, courts of law, and motor vehicle departments, of any state in which I reside (or have resided).

Applicant Signature:

Date: