CITY OF TUSCUMBIA
PART-TIME or TEMPORARY

APPLICANT INFORMATION Date of Application: _____

Social Security No. _____ Date of Birth: _____

Last Name: _____ First Name: _____ M.I. _____

Street Address: _____ City: _____ State: _____

Position/Department Desired: _____ Part-Time ___ or Temporary ___

Date Available: _____ Phone Number ( ) _____ Referred By: _____

Do you have Family who works for the City of Tuscumbia? ☐Yes ☐No If Yes, provide name(s)

_____ _____ _____

DISCLAIMER AND AUTHORIZATION

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired as a Part-Time or Temporary Employee, my employment will be "at will" without a fixed term and I may be terminated at any time with or without cause and without prior notice at the option of either myself or the City of Tuscumbia. No promises regarding "Permanent" employment have been made to me, and I understand that no such promise or guarantee is binding upon the City of Tuscumbia.

If I am offered Part-Time or Temporary employment, I agree to submit to a drug test before beginning work. I understand that I will abide by the City of Tuscumbia's Drug and Alcohol Policy; I agree the City of Tuscumbia is not liable to register the Part-Time or Temporary Employee for any statutory deductions, benefits or other instances of employment normally related to the "Permanent" Employee.

As a Part-Time or Temporary Employee, I will perform work as required by the City of Tuscumbia and my services shall automatically terminate when the job is completed or when the requirements of the job have been met.

I understand that filling out this form does not indicate there is a position open and does not obligate the City of Tuscumbia to hire a Part-Time or Temporary Employee. If hired, I agree to abide by all city rules, policies and procedures. The City of Tuscumbia retains the right to revise its policies and procedures, in whole or in part, at any time.

SIGNATURE

Date: _____ Signature: _____

The City of Tuscumbia encourages all applicants to make known any accommodations needed during the process of making application for a position within the City. The City of Tuscumbia requests a 24 hour notice if such service is needed.

The City of Tuscumbia is an "Equal Opportunity Employer".

QUESTIONAIRE

PLEASE ANSWER THE FOLLOWING QUESTIONS:

YES	NO	
☐	☐	1. Have you used marijuana in the past twelve (12) months?
☐	☐	2. Have you used any other illegal drug(s) during the past ten (10) years?
☐	☐	3. Have you ever sold any kind of drugs?
☐	☐	4. Have you ever been arrested for possession of illegal drugs?
☐	☐	5. Have you been convicted of D.U.I. in the past five (5) years?
☐	☐	6. Have you had five (5) or more accidents during the past five (5) years?
☐	☐	7. Have you ever been convicted of shoplifting?
☐	☐	8. Have you ever been convicted of writing bad checks?
☐	☐	9. Have you ever been convicted of a felony?
☐	☐	10. Have you ever been convicted of any other kind of theft?
☐	☐	11. Have you ever been arrested for any other criminal offense?

READ AND SIGN THE FOLLOWING CERTIFICATE

I HEREBY CERTIFY THAT THERE ARE NO WILLFUL MISREPRESENTATIONS OR FALSIFICATIONS OF THE ABOVE STATEMENT AND ANSWERS TO THE QUESTIONS. I AM AWARE THAT SHOULD AN INVESTIGATION DISCLOSE SUCH MISREPRESENTATIONS OR FALSIFICATIONS, MY APPLICATION WILL BE REJECTED AND I WILL BE DISQUALIFIED FROM THE SERVICE OF THE CITY OF TUSCUMBIA.

SIGNED: _____

DATE: _____