



Seasonal Application for Employment

Forward completed application to: Parks and Recreation Administration Office
717 West Main, Arlington TX 76013-1855

PLEASE PRINT

| | | | |
|------------|-------------|-----------------|--------|
| Last Name: | First Name: | Middle Initial: | Email: |
|------------|-------------|-----------------|--------|

Current Address/City, State, Zip

| | | |
|--|-------------|-------------------------|
| Other Name by which you are Known, if Different from Present:: | Home Phone: | Cell/Work/Other Number: |
|--|-------------|-------------------------|

Previous Address/City, State, Zip

If you have lived outside of Texas within the last seven years, indicate State(s) _____

| | | |
|---------------------------|----|----|
| Position(s) Applying for: | A. | B. |
|---------------------------|----|----|

| | | |
|---------------------|----|----|
| Location preferred: | A. | B. |
|---------------------|----|----|

| | | | |
|-------------------------|-----|----|--------------------------------------|
| Are you age 18 or over? | Yes | No | If no, what is your exact age? _____ |
|-------------------------|-----|----|--------------------------------------|

| | | | |
|---|-----|----|--|
| Are you related to any city employee and/or official? | Yes | No | If yes, please provide: Name: _____ Department: _____ Relationship: _____ |
|---|-----|----|--|

Have you ever admitted guilt or been found guilty (including deferred adjudication) of committing a felony or misdemeanor? (This would include offenses for which probation was granted, excluding minor traffic violations but including DWI.) Yes No if yes, explain in the space provided, giving the date and nature of offense, name and location of court and the disposition of case.

EDUCATION & CERTIFICATION INFORMATION

| Name of School and Location | Graduated? Check One | | Diploma/ Degree | Major / Subjects |
|-----------------------------|----------------------|----|--------------------|------------------|
| | Yes | No | | |
| High School | | | | |

| College and/or University | Yes | No | Diploma/ Degree | Major / Subjects |
|---------------------------|-----|----|--------------------|------------------|
| _____ | | | | |

| List Certification(s) Held | Agency | Expiration Date |
|----------------------------|--------|-----------------|
| | | |
| | | |

EMPLOYMENT INFORMATION

| From Month/Yr | To Month/Yr | Name and Location of Organization | Position Title | Final Salary | Supervisor/ Phone | Reason for Leaving |
|---------------|-------------|-----------------------------------|----------------|--------------|----------------------|--------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

Signature: _____ Date: _____

I hereby certify that all information provided is true and complete and understand that the information on this employment application is subject to verification and is releasing consent to any pre-employment checks, including but not limited to background, credit, physical and/or MVR checks. I agree and understand that any falsification of such information, regardless of time of discovery, may forfeit my employment with the City of Arlington. **Federal Law prohibits discrimination based on age, race, religion, sex or national origin.**