

# APPLICATION FOR EMPLOYMENT

APPLY ONLINE: <https://www.governmentjobs.com/careers/alamogordo>

PHONE: (575) 439-4399 | FAX: (575) 439-4367 EMAIL:

[coahr@ci.alamogordo.nm.us](mailto:coahr@ci.alamogordo.nm.us)

WEBSITE: [ci.alamogordo.nm.us/258/Human-Resources](http://ci.alamogordo.nm.us/258/Human-Resources)



*The City of Alamogordo is an Affirmative Action/ Equal Opportunity Employer.*

## NOTICE TO APPLICANTS:

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

## PERSONAL INFORMATION

TYPE OR PRINT LEGIBLY IN INK

<b>POSITION APPLYING FOR</b> (List only one):		<b>APPLICATION DATE:</b>
<b>NAME</b> (LAST, FIRST, MIDDLE INITIAL):		
<b>OTHER NAMES USED</b> (i.e., Maiden, previous married name, etc.):		
<b>MAILING ADDRESS</b> (STREET, CITY, STATE/PROVINCE, ZIP/POSTAL CODE):		
<b>PHONE NUMBER:</b>	<b>SECOND PHONE NUMBER:</b>	<b>E-MAIL:</b>
<b>DRIVER'S LICENSE:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>DRIVER'S LICENSE</b> (STATE, NUMBER, CLASS):	<b>CDL:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
<b>ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>IF UNDER 18, CAN YOU FURNISH A WORKER'S PERMIT?</b> <input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>IF REQUIRED, WILL YOU UNDERGO A PRE-EMPLOYMENT PHYSICAL?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		

## PREFERENCES

<b>SALARY DESIRED:</b>	<b>DATE AVAILABLE:</b>	<b>WILLING TO RELOCATE?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> MAYBE
<b>TYPE OF POSITION DESIRED:</b> <input type="checkbox"/> PART TIME <input type="checkbox"/> FULL TIME <input type="checkbox"/> TEMPORARY/SEASONAL	<b>SHIFTS YOU WILL ACCEPT:</b> <input type="checkbox"/> DAY <input type="checkbox"/> EVENING <input type="checkbox"/> NIGHT <input type="checkbox"/> WEEKENDS <input type="checkbox"/> ON CALL	

## ADDITIONAL QUESTIONS

<b>HAVE YOU EVER BEEN EMPLOYED WITH THE CITY OF ALAMOGORDO?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<b>DEPARTMENT:</b>
<b>ARE YOU RELATED TO ANY CITY EMPLOYEES OR ELECTED OFFICIALS?</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<b>RELATIONSHIP:</b>
<b>IF YES, THE DATES:</b>		
<b>IF YES, NAME:</b>		
<b>HOW DID YOU HEAR ABOUT THIS POSITION?</b> <input type="checkbox"/> CITY HALL JOB BOARD <input type="checkbox"/> CITY WEBSITE <input type="checkbox"/> NEWSPAPER <input type="checkbox"/> OTHER: _____		
<input type="checkbox"/> I WAS REFERRED BY: _____		

## FOR HR OFFICE USE ONLY:

RECEIVED  REVIEWED  SELECTED TO INTERVIEW  NOT SELECTED FOR INTERVIEW  WITHDREW APPLICATION

### NOTIFICATION HISTORY:

<b>EMAIL LOG:</b>	<b>CALL LOG:</b>	<b>NOTES:</b>

## WORK EXPERIENCE

CHECK THE BOX IF YOU HAVE NO WORK HISTORY.

- List your employment dates from the last 7 years, recent employment first.
- Include additional employers and experience relating to the duties of the position applying for.
- Explain any gaps in employment (*additional information section*).
- Attach extra sheets of paper (if necessary).

<b>POSITION TITLE:</b>	<b>EMPLOYER:</b>	<b>DATES</b> (MONTH/YEAR to MONTH/YEAR):
<b>ADDRESS</b> (STREET, CITY, STATE/PROVINCE, ZIP/POSTAL CODE):		<b>PHONE NUMBER:</b>
<b>LAST SALARY:</b>	<b>HOURS PER WEEK:</b>	<b>NUMBER OF EMPLOYEES SUPERVISED:</b>
<b>SUPERVISOR'S NAME:</b>	<b>SUPERVISOR'S TITLE:</b>	<b>SUPERVISOR'S EMAIL:</b>
<b>SPECIFIC DUTIES:</b>		
<b>REASON FOR LEAVING:</b>		<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER

<b>POSITION TITLE:</b>	<b>EMPLOYER:</b>	<b>DATES</b> (MONTH/YEAR to MONTH/YEAR):
<b>ADDRESS</b> (STREET, CITY, STATE/PROVINCE, ZIP/POSTAL CODE):		<b>PHONE NUMBER:</b>
<b>LAST SALARY:</b>	<b>HOURS PER WEEK:</b>	<b>NUMBER OF EMPLOYEES SUPERVISED:</b>
<b>SUPERVISOR'S NAME:</b>	<b>SUPERVISOR'S TITLE:</b>	<b>SUPERVISOR'S EMAIL:</b>
<b>SPECIFIC DUTIES:</b>		
<b>REASON FOR LEAVING:</b>		<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER

<b>POSITION TITLE:</b>	<b>EMPLOYER:</b>	<b>DATES</b> (MONTH/YEAR to MONTH/YEAR):
<b>ADDRESS</b> (STREET, CITY, STATE/PROVINCE, ZIP/POSTAL CODE):		<b>PHONE NUMBER:</b>
<b>LAST SALARY:</b>	<b>HOURS PER WEEK:</b>	<b>NUMBER OF EMPLOYEES SUPERVISED:</b>
<b>SUPERVISOR'S NAME:</b>	<b>SUPERVISOR'S TITLE:</b>	<b>SUPERVISOR'S EMAIL:</b>
<b>SPECIFIC DUTIES:</b>		
<b>REASON FOR LEAVING:</b>		<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER

## EDUCATION BACKGROUND

**CHECK ONE BELOW: High School Graduate or General Educational Development (GED) recipient?**

**YES**       **NO** If no, what is the highest grade completed? \_\_\_\_\_

**LIST SCHOOLS (NAME/ADDRESS), MOST RECENT FIRST:**

SCHOOL NAME/LOCATION:	DATES ATTENDED:	MAJOR SUBJECT:	DEGREE/YEAR:	GRADUATE:
	TO: FROM:			<input type="checkbox"/> YES <input type="checkbox"/> NO
	TO: FROM:			<input type="checkbox"/> YES <input type="checkbox"/> NO

## CERTIFICATES & LICENSES

Occupational License, Certificate, or Registration:	Number:	Where Issued:	Expiration Date:
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**LANGUAGES** *List all the languages read, written, or spoken fluently (including English).*

Read:	Speak:	Write:
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## VETERAN INFORMATION *(most recent)*

Are You a Veteran? <input type="checkbox"/> YES <input type="checkbox"/> NO	Branch of Service:	Date of Entry:	Date of Discharge:
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## 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
<b>Computer Skills:</b>				
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"/>
Typing WPM:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other Skills:</b>				
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 the EMPLOYMENT HISTORY section**) **AND**
- Two Personal References (**not related to the applicant**).

Name	Email Address	Phone	Best Time to Call	Years Known

**READ & SIGN THE STATEMENTS BELOW**

*(Unsigned applications are considered incomplete and ineligible for review.)*

The facts outlined in my application for employment are true and complete to the best of my knowledge. By my signature below:

- ✓ 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.
- ✓ 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.
- ✓ I acknowledge that the City of Alamogordo Human Resources Department relies heavily on email communication.
  - I confirm that the email address I have provided is a valid email account.
  - I understand that my computer settings may cause email messages from the City to go to my Spam or Junk folders.
- ✓ 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 of six (6) months.
  - The probationary period for Police and Fire is one (1) year.
  - This probationary period does not apply to "At-Will" employees.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**AUTHORIZATION OF CRIMINAL ARRESTS, CREDIT HISTORY, & DRIVING RECORD**

By my signature below, I (PRINT NAME) \_\_\_\_\_, 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.

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

\_\_\_\_\_  
\_\_\_\_\_

**E-VERIFY ACKNOWLEDGEMENT**

By my signature below, I (PRINT NAME) \_\_\_\_\_, 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 /ALCOHOL-FREE WORKPLACE AGREEMENT**

- ✓ DRUG/ALCOHOL-FREE WORKPLACE (External Applicant = Not a current City employee).  
All offers to an external applicant, for initial employment with the City of Alamogordo, shall be extended conditionally upon the applicant successfully passing a pre-employment drug test with a negative result. Should an applicant have a pre-employment drug test with a positive result (including a positive result for THC), the conditional offer of employment shall be rescinded. Applicants failing a pre-employment drug and/or alcohol test shall not be eligible for consideration of employment in any position with the City of Alamogordo for a period of one (1) year after the date of the test.
- ✓ DRUG/ALCOHOL-FREE WORKPLACE (Internal Applicant = Current City employees).  
When an employee being placed, transferred, or promoted submits to a drug test under any of the applicable provisions in the City's Employee Manual and has a verified positive result (including a positive result for THC), the employee shall be subject to corrective action up to and including termination.

**I acknowledge the City of Alamogordo's Zero Tolerance policy and I understand the consequences of a positive drug test.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_