

## Serving the Cities of Bryan, Denton, Garland & Greenville www.Texasmpa.org

Texas Municipal Power Agency ("TMPA") is an equal opportunity employer and does not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Human Resources Department.

All applications must be completed in full. Incomplete applications will not be seriously considered.

Name:				Date:
_	(Last)	(First)	(Full Middle)	
Address:				
	(Street)	(City)	(State)	(Zip)
Home Ph	none:	Cell Phone:	Email:	
			Date you will be available to	start work:
Position(	(s) applied for:			
	ills and Qualifications ize any job-related tra	ining, skills, licenses, certificate	es, and/or other qualifications:	
		years completed, course of stu	5 5 6	
College:				
Technica	I Training:			
Other:				
Reference	ces			

List 3 professional (references names, telephone numbers):

## Relatives

Relationships are defined as follows;

Blood or Marriage	Blood	Personal Relationship
<ul> <li>The following relatives who are related by blood or marriage:</li> <li>Spouses</li> <li>Children</li> <li>Parents (in-laws)</li> <li>Grandparents (in-laws)</li> <li>Grandchildren</li> <li>Siblings</li> </ul>	<ul> <li>The following relatives if they are related by blood:</li> <li>Aunts</li> <li>Uncles</li> <li>Nieces</li> <li>Nephews</li> <li>First cousins</li> </ul>	<ul> <li>Parties to a romantic, personal relationship shall be considered "relatives" if they live together in the same residence.</li> </ul>

## **Employment History**

Begin with your most recent employment and work your way back at least 5 years. Please provide all employment information for your past four employers or five years of work history. Attach additional sheets if necessary.

Employer:	Position held:
Address:	Telephone #:
Immediate supervisor and title:	May we contact?
Dates employed: from To:	Salary:
Job summary:	
Reason for leaving:	
Employer:	Position held:
Address:	Telephone #:
Immediate supervisor and title:	May we contact?
Dates employed: from To:	Salary:

Job summary:						
Reason for leaving:						
Employer:			Position held:			
Address:			Telephone #:			
Immediate supe title:	ervisor and		May we contact?			
Dates employed:	from	То:	Salary:			
Job summary:						
Reason for leaving:						
Criminal History	У					
Have you been	convicted of a	crime in the last 7	7 years?	Yes	No	
If yes, please ex	plain (a convic	tion will not autor	matically bar employm	ent):		

## Referrals

How were you referred to us? (If by a current TMPA employee, please list their name(s))

I hereby authorize TMPA to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability TMPA, its directors, officers, employees, and agents for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either TMPA or I may terminate the employment relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of TMPA not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the Americans With Disabilities Act.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent that I have read and understand this employment application, and that the information I have provided in this application is true and correct to the best of my knowledge and belief.

Applicant signature: Date:
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As part of our hiring background and investigation, Texas Municipal Power Agency may obtain consumer reports to prepare an investigative consumer report. The investigative consumer report may consist of contacting all listed prior employers to verify your employment history. It may also include, but not be limited to, criminal history reports and driving history records. Under the provisions of the Fair Credit Reporting Act (15 USC at 1681-1681u) as amended, before we can seek such reports, we must have your written permission to obtain the information. You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation. You are also entitled to a copy of your Rights under the Fair Credit Reporting Act.