

## **City of Heath**

Heath, TX 75032 Phone: (972) 771-6228 · Fax: (972) 961-4932

### Dear Applicant,

Thank you for considering the City of Heath as an employment opportunity. Applications are only accepted for posted positions.

Applications not meeting the minimum qualifications will not be processed.

Applications meeting the minimum qualifications will be forwarded to the hiring authority. Applications with preferred qualifications will receive first consideration. Applicants who meet the minimum qualifications but are not interviewed will be notified of the filled position by mail.

### Check list for applicants:

- Read the complete job posting for the position you are applying for. The job postings are located in the lobby of City Hall and are posted on the City's web site at <a href="https://www.heathtx.com">www.heathtx.com</a>. Both are updated when changes occurs.
- If applicable, be sure you meet all Minimum Qualifications listed on the job posting.
- Complete a separate application for each posted position for which you are qualified.
- Complete an Applicant Acknowledgement and Authorization Form which is attached to the application.
- Submit completed application and above listed forms to Human Resources.
- We are hiring individuals for a career with the City of Heath. To select individuals
  best suited for our positions, a careful review of all qualified candidates if
  required. This consideration takes time, and we ask you to please be patient
  during the process.

We appreciate your interest in employment with the City of Heath

### **CITY OF HEATH**

you for this position.

# Employment Application The City of Heath is an Affirmative Action/Equal

FAILURE TO FULLY FILL OUT THIS FORM OR ATTACH APPLICABLE INFORMATION MAY ELIMINATE YOUR APPLICATION FROM FURTHER CONSIDERATION.

Opportunity Employer of q	jualified ind	dividua	ls.							
PERSONAL INFORM	NOITAN									
NAME (LAST, FIRST, MIDDLE)						SOCIAL SECURIT NUMBER				
PRESENT ADDRESS		APT. NO.	CITY			STATE	-			ZIP
PHONE		ALTERNATE PHONE NUMBER				ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN U.S.?   YES				
	DRIVER'	S LICEN	SE DL#:	;	STATE:		CLASS:		B 🗆 C	
Email										
POSITION DESIRED	)									
POSITION TITLE				DATE Y	OU CAN	I				
ARE YOU EMPLOYED NOW?	IF SO, MAY WE ( YOUR PRESENT EMPLOYER?		YES	□nc	ARE SEE	KING L	□Full-time [ □Summer	□Part-tim	ne □Sea	asonal
ARE YOU CURRENTLY EMPLOYED BY THE CITY OF HEATH?	□YES □	NO	DEPARTMENT:			D	DATES:			
HAVE YOU EVER BEEN EMPLOYED BY THE CITY OF HEATH?	□YES □		DEPARTMENT:			D	DATES:			
REASON FOR LEAVING			1			I				
DO YOU OR YOUR SPOUSE HAVE ANY RELATIVES WORKING FOR THE CITY OF HEATH?	□YES □	NO	NAMES:			R	RELATIONSHIP:			
WHO REFERRED YOU TO THE O	ITY OF HEATH	H? □	Friend $\Box$	Ad	☐ Jo	b Line	☐ Walk In	☐ Oth	ier	
Have you ever been convicted or r	eceived deferre	d adjudica	ation for a felony	? 🔲 N	o 🗆	YES, pl	ease explain:_			
(A criminal record will not necessar	rily disqualify yo	ou from en	nployment. Eacl	h case is c	nsidered	d in relation	ship to the positi	ion sought.)		
EDUCATION										
SCHOOL LEVEL	NAME AN	D LOCA	TION OF SCH	IOOL		HOURS	DID YO		SUBJE(	
HIGH SCHOOL/GED				_	$\overline{}$					
COLLEGE				_						
TECHNICAL/BUSINESS										
GENERAL SKILLS										
OFFICE	☐ MS ACCE	D	□ MS	PUBLISH EXCEL OUTLOO		_ C	OTHER		KEYBOAR SPEED:	
	SURFACE	WATER		R:			WATER COL			\:
PUBLIC WORKS	WASTEWA WATER DI		TION G	R: R:	- - 	OTHER				l:
List CERTIFICATIONS,SKILLS							3			
and STRENGTHS that qualify	2			·		4	l			

FORMER EMPLOYERS LIST BELOW YOUR LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST. IF ADDITIONAL SPACE IS REQUIRED, LIST INFORMATION ON A SEPARATE PAGE. ALL INFORMATION IS SUBJECT TO VERIFICATION. YOU MUST INCLUDE TELEPHONE NUMBERS. THE INFORMATION BELOW MUST BE COMPLETED IN FULL EVEN IF A RESUME IS ATTACHED.

Name of Present or Last Employer		
Address, City, State, Zip		
Starting Date	Leave Date	Job Title
Starting Salary or Wage	Final Salary or Wage	Reason For Leaving
Description of Work		
Name, Title, and Contact Number of Supervisor	May We Contact Your Supervisor  YES NO	
Name of Present or Last Employer		
Address, City, State, Zip		
Starting Date	Leave Date	Job Title
Starting Salary or Wage	Final Salary or Wage	Reason For Leaving
Description of Work		
Name, Title, and Contact Number of Supervisor	May We Contact Your Supervisor  YES NO	
Name of Present or Last Employer		
Address, City, State, Zip		
Starting Date	Leave Date	Job Title
Starting Salary or Wage	Final Salary or Wage	Reason For Leaving
Description of Work		
Name, Title, and Contact Number of Supervisor		May We Contact Your Supervisor  YES NO
REFERENCES LIST BELOW THE NAMES KNOWN YOU AT LEAST ONE YEAR. YO	OU MUST INCLUDE TELEPHONE	ERSONS OTHER THAN YOUR SUPERVISOR, WHO HAVE NUMBERS.
NAME	PHONE	EMPLOYER LOCATION/WORK RELATION OF ACQUAINTANCE
I certify that all answers given by me are true, accurate an	nd complete. I understand that the falsification	, misrepresentation, or omission of fact on this application (or any other accompanying or require

documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered. The applicant releases the employer, and all persons and entities who supply the employer with information pertaining to the applicant, from any and all liability, including liability arising from the employer's negligence, arising from the employer's verification of the applicant's prior employment history, criminal record, references and any other background information pertaining to the applicant.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

(TO BE COMPLETED BY APPLICANT)

I acknowledge receipt of the NOTICE REGARDING APPLICANT BACKGROUND

INVESTIGATION and the SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT

REPORTING ACT and certify that I have read and understand both of these forms.

I authorize City of Heath and/or its affiliates (collectively, the "City") to obtain a

consumer report (and/or investigative consumer report) or other background information

used in connection with consideration of my application for employment. I release the

City and its partners, stockholders, officers, directors, agents, employees, and affiliates

from any and all liability for damages of whatever kind, which may arise from or relate to

any consumer report (and/or investigative report) or other background information

requested, obtained or used by the City in connection with my application for

employment.

mame	 		
Date :			

# NOTICE REGARDING APPLICANT BACKGROUND INVESTIGATION

# IMPORTANT—PLEASE READ CAREFULLY BEFORE SIGNING ATTACHED ACKNOWLEDGEMENT

You have applied for employment with City of Heath and/or its affiliates (collectively, the "City"). In evaluating your application, the City may, upon execution of this authorization, investigate the information contained in your application, and other relevant background information to determine whether you are a suitable candidate for the position with the City.

The City has the right to refuse to offer you employment, should you decline to authorize a background investigation your employment application will be deemed withdrawn. If you do authorize a background investigation, you have certain rights, explained in the attached "Summary of Your Rights Under the Fair Credit Reporting Act."

In the course of the City's consideration of you for employment, you may be the subject of a "consumer report" (or "investigative consumer report") requested by the City from an outside agency if you sign this authorization.

A consumer report may contain information obtained from an outside agency on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics mode of living. (An investigative consumer report may contain information obtained by an outside agency through personal interviews with sources such as neighbors, friends or associates as to your character, general reputation, personal characteristics and/or mode of living.)

You have the right, upon written request made within a reasonable time after receipt of this notice, to obtain information from the City (i) as to whether a consumer report and/or investigative consumer report has been requested, (ii) if an investigative consumer report has been requested, written disclosure of the nature and scope of the investigation requested, and (iii) the name and address of the outside agency to whom requests for any of these reports has been made.

### **A SUMMARY OF YOUR RIGHTS UNDER**

#### THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you—such as if you pay your bills on time or have filed bankruptcy—to creditors, employers, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. §§ 1681 – 1681u, at the Federal Trade Commission's web site (http://www.ftc.gov). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- You must be told if information in your file has been used against you. Anyone who uses information from a
   CRA to take action against you such as denying an application for credit, insurance, or employment must give you the name, address, and phone number of the CRA that provided the report.
- You can find out what is in your file. At your request, a CRA must give you all the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You are also entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must reinvestigate the items (usually within 30 days) by presenting to this information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report your findings to the CRA. (The source must also advise national CRAs to which it has provided the data of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not solve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.

- Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove accurate data from your file, unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- You can dispute inaccurate items with the source of the information. If you tell anyone such as a creditor who reports to a CRA that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, they may not continue to report it if it is in fact an error.
- Outdated information may not be reported. In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcy.
- Access to your file is limited. A CRA may provide information about you only to those who have a need
  recognized by the FCRA usually to consider an application with a creditor, insurer, employer, landlord, other
  business.
- Your consent is required for reports that are provided to employers, or reports that contain medical
  information. A CRA may not give out information about you to your employer, or prospective employer, without
  your written consent. A CRA may not report medical information about you to creditors, insurers, or employers
  without your permission.
- You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off this list indefinitely.
- You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violated the FCRA, you may sue them in state or federal court.

### The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING: CRAs, creditors and others not listed below	PLEASE CONTACT: Federal Trade Commission Consumer Response Center – FCRA Washington, DC 20580 202-326-3761
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B. appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington, DC 20552 * 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-518-6360
Banks that are State-chartered or, are not Federal Reserve System members	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator- GIPSA Washington, DC 20250 202-720-7051