

Town of Eagar 22 W. 2nd St. PO Box 1300 Eagar AZ 85925 (928) 333-4128 (928) 333-5140 (fax)

PUBLIC WORKS / OPERATOR APPLICATION FOR EMPLOYMENT

PLEASE **PRINT** CLEARLY

Name of Applicant	Ph	one Number		
Mailing Address Ci	ty	State		Zip
Position applying for:		Temporary	Part Time	Full Time
Who referred you?		Rate of pay exp	ected?	
Have you worked for the Town of Eagar before	?	Dates: From _	Month / Year	ToMonth / Year
Where?	Rate of Pay		Position	
Reason for Leaving				
Names of Relatives working here				
Are you currently employed?	If not, how	long since leaving last	employment?	
	EDUC	CATION		
Circle highest grade level completed: 1	2 3 4 5	6 7 8 9 10	11 12 Co	llege: 1 2 3 4
Last school; attendedName			Address	

GENERAL

Have you ever been convicted of a felony? _____ If yes, please explain fully <u>on a separate sheet of paper</u>. Conviction of a crime is not an automatic bar to employment – all circumstances will be considered.

EMPLOYMENT RECORD

The U.S. Department of Transportation requires that **driver applicants** show all employment for the past three years. Effective July, 1987 they must show commercial driver employment for the seven years immediately proceeding this year period. δ 391.21 (B) (10), (11)

All operators of Town vehicles and equipment shall hold a current Arizona operator's and/or other appropriate Driver's License at all times.

Company:		Supervisor:	
Address:		Phone	::
Position Held:	From	To	Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	::
Position Held:	From	To	Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	::
Position Held:	From	To	Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	::
Position Held:	From	To	Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	×
Position Held:	From	To	Salary
Reason for leaving			

EMPLOYMENT RECORD, CONTINUED

Signature of Applicant

Company:		Supervisor:	
Address:		Phone	2:
Position Held:	From	To	Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	::
Position Held:	From	To	Salary
Reason for leaving			
Company:		Supervisor:	
Address:		Phone	2:
Position Held:	From	To	Salary
Reason for leaving			
The Town of Eagar is an Equ	al Opportunity Employer.		
	APPLICANT MUST F	READ AND SIGN	
understood that the employer or his employment history, whether same any damages on account of furnish may be asked to demonstrate that I	ing such information. I understand	ound to ascertain any and aployers and other person that, as an applicant for a lich are pertinent to the join	
I further certify that I am a genuine employment with the Town of Eag		application is being subm	nitted solely for the purpose of seeking
	nt under the Fair Credit Reporting A mer Report, including information r		have been told that this investigation eneral reputation, personal
I agree to furnish such additional ir	formation and complete such exam	inations as may be require	ed to complete my employment file.
I also understand the misrepresenta	tion or omission of information or f	acts may result in my reje	ection or dismissal.
	rules and policies of the Town of Ea ation in it are true and complete to t		is application was completed by me,

Date

DRIVER EXPERIENCE AND QUALIFICATION

All operators of Town vehicles and equipment shall hold a current Arizona operator's and/or other appropriate Driver's License at all times.

Licenses:					
Drivers	State	License No.	Class	Endorsement(s)	Expiration Date
Licenses held					
in past 3 years					
MUST be					
shown					

Licenses held in past 3 years MUST be shown							
A. Have	you ever been	denied a license, permit or pr	rivilege to operate	e a motor vehic	cle?	Yes	No
B. Has a	ny license, per	mit or privilege ever been sus	spended or revoke	ed?		Yes	No
C. Have	you ever been	disqualified for violations of	the Federal Moto	or Carrier Safe	ty Regulations?	Yes	No
If you answere	ed yes to A, B,	or C, please attach a statemer	nt giving details.				
Driving Exp	perience:						
8		Type of Equipmen	nt	Dates			Approximate
Class of equip	ment	(Van, Tank, Flat, et		m	То		Total Miles
Straight Truck							
Tractor and Se	mi-Trailer						
Twin Trailers -	- LVC's						
Other							
List states open		•					
List special co	urses or trainin	ng that will help you as a drive	er				
List driving aw	vards held and	who awards were presented b	ру				
Accident Ro	eview for pa	ast 3years (Attach sepa	rate sheet of p	paper if mo	re space is ne	eded):
_		Nature of accident					
Dates	-	(Head-On, Rear-End, Overtur	rn, etc.	Fatalit	ies		Injuries
Last Accident							
Next Previous							
Nevt Previous							

Traffic Convictions and Forfeitures for the past 3 years other than parking violations:

Location	Date	Charge	Penalty

Revised: 4/9/2024

WORK RELATED EXPERIENCE AND QUALIFICATIONS

Water / Wastewater:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Trench Experience		
Shovel Experience		
Fixing or repairing broken		
lines under pressure		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Pressure Testing Lines		
Fittings Experience		
Manhole Installation		
Sewer Jet or Cleaning		

Roads:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Patching		
Culvert Installation		
Blading / Maintaining Roads		
Chipsealing		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Asphalt		
Other (Specify)		
Other (Specify)		
Other (Specify)		

Facilities:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Carpentry		
Plumbing		
Electrical		
Dry Wall		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Concrete (finishing,		
forming, etc.)		
Other (Specify)		
Other (Specify)		

Heavy Equipment:

Treaty Equipment		
Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Backhoe		
Front End Loader		
Skiploader / Gannon		
Blade / Grader		
Dozer		
Excavator		
Forklift		
Steel Wheel Roller		
Pneumatic Roller		

Indicate training and experience in the following:	Formal Training (Check)	Years of Experience
Street Sweeper	, ,	•
Chip Box		
Air Compressor		
Cement Mixer		
Boom / Bucket Truck		
Platform		
Other (Specify)		
Other (Specify)		
Other (Specify)		

Fleet Maintenance Experience:

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Drive Line Components		
Diesel Engine Tune-Up and		
Rebuild		
Gas Engine Tune –Up and		
Rebuild		
Tire Service		
Trailer Repair		
Air		
Conditioning		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Body Work		
Electrical		
Repair		
Frame and		
Wheel Alignment		
Brakes		
Cooling System		
Inspections		
General Car /repair		

Revised: 4/9/2024

WORK RELATED EXPERIENCE AND QUALIFICATIONS, CONTINUED

Shop Equipment:

onop Equipment.		
Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Electrical Diagnostic Equip.		
Sheet Metal Equipment		
Frame & Axle Straightening		
Equipment		
Engine Rebuilding		
Diesel Injection Equipment		
Oxyacetylene Welder		
Paint Spray Gun		
Air conditioning		
_		
Inspections		

Indicate training and	Formal Training	Years of
experience in the following:	(Check)	Experience
Time Servicing Machine		
Wheel & Tire Balancing		
Mach		
Tire Recapping Mold		
Engine Dynamometer		
Chassis Dynamometer		
Magnetic Crack Defector		
Engine Analyzer		
Noise Measuring Equipment		
Smoke Measuring		
Equipment		
General Car Repair		

List courses and training in fleet maintenance work_		
<u> </u>		

APPLICANT MUST READ AND SIGN

I CERTIFY THAT I HAVE READ AND UNDERSTAND ALL OF THIS EMPLOYMENT APPLICATION. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with the Town of Eagar, I may be asked to demonstrate that I am capable of performing tasks, which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the Town of Eagar and for no other reason.

It is also agreed and understood that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include and investigate Consumer Report, including information regarding my character, general reputation, personal characteristics and mode of living.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand the misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the Town of Eagar.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best on my knowledge.

Signature of Applicant	•	Date

Revised: 4/9/2024