

# APPLICATION FOR EMPLOYMENT

**Burritt Museum**  
3101 Burritt Dr SE  
Huntsville, AL 35801  
(256) 536-2882

## AN EQUAL OPPORTUNITY EMPLOYER

### TO THE APPLICANT:

We appreciate your interest in employment with the Burritt Museum and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in evaluating and identifying you for the position that best meets your qualifications. Burritt Museum, being an Equal Opportunity Employer, assures you as an applicant, impartial consideration. Therefore, it is extremely important for you to provide us with that information which would best qualify you for the position desired. Your Application will be valid for 12 months.

### PERSONAL

#### FOR PERSONNEL USE ONLY

ANNOUNCEMENT NO. \_\_\_\_\_  
ANNOUNCEMENT DATE \_\_\_\_\_  
JOB CODE # \_\_\_\_\_

\_\_\_\_\_  
POSITION DESIRED \_\_\_\_\_ DATE \_\_\_\_\_  
\_\_\_\_\_  
NAME: LAST FIRST MIDDLE

\_\_\_\_\_  
PRESENT ADDRESS: NO. STREET SOCIAL SECURITY NO. \_\_\_\_\_  
\_\_\_\_\_  
CITY STATE ZIP TELEPHONE WHERE YOU MAY BE REACHED BETWEEN 8 A.M. - 5 P.M. \_\_\_\_\_

HAVE YOU WORKED FOR THE CITY BEFORE? YES \_\_\_ NO \_\_\_ (IF YES, FROM \_\_\_\_\_ TO \_\_\_\_\_ )  
IF YES, WHICH DEPARTMENT(S)? \_\_\_\_\_

DO YOU HAVE RELATIVES EMPLOYED BY THE CITY? YES \_\_\_ NO \_\_\_  
IF YES, LIST NAMES, RELATIONSHIP AND DEPARTMENTS WHERE THEY WORK

NAME	RELATIONSHIP	DEPARTMENT
_____	_____	_____
_____	_____	_____

WILL YOU ACCEPT SHIFT WORK INCLUDING WEEKENDS? YES \_\_\_ NO \_\_\_  
DO YOU HAVE A VALID DRIVERS LICENSE? YES \_\_\_ NO \_\_\_ D.L. NO. \_\_\_\_\_ STATE \_\_\_\_\_  
HAVE YOU EVER BEEN DISCHARGED FROM ANOTHER JOB? YES \_\_\_ NO \_\_\_  
IF YES, EXPLAIN \_\_\_\_\_

In the past seven (7) years, have you ever been convicted of a crime (felony or misdemeanor including DUI), pleaded guilty to, or been fined for any other offense other than minor traffic citations, hunting or fishing violations, or do you have any charges currently pending against you? (This will be verified). Please note that this question relates only to a criminal conviction and NOT an arrest that has been nolle prossed or dismissed. A conviction will not necessarily result in denial of employment. However omission or falsification of information may eliminate an applicant from the hiring process. YES \_\_\_ NO \_\_\_

If yes to prior question, explain all (include Date of Conviction, Charge, City & State)

WERE YOU IN THE UNITED STATES ARMED FORCES? YES \_\_\_ NO \_\_\_ IF YES, WHAT BRANCH? \_\_\_\_\_  
DATES OF DUTY: FROM \_\_\_\_\_ TO: \_\_\_\_\_ What type of education, training and work experience relevant to the job did you receive while in the military? \_\_\_\_\_

## RECORD OF EDUCATION

SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	CHECK LAST YEAR COMPLETED				DID YOU GRADUATE?	DIPLOMA OR DEGREE
			5	6	7	8	YES ___ NO ___	
<b>ELEMENTARY</b>		<div style="border: 1px solid black; width: 100px; height: 100px; transform: rotate(45deg); margin: 0 auto;"></div>						<div style="border: 1px solid black; width: 100px; height: 100px; transform: rotate(45deg); margin: 0 auto;"></div>
<b>HIGH</b>								
<b>COLLEGE</b>								
<b>OTHER</b>								

### PRIOR WORK HISTORY (LIST IN ORDER, LAST OR PRESENT EMPLOYER FIRST)

<b>1</b> DATES OF EMPLOYMENT (Month, Day, Year) FROM _____ TO _____	EXACT TITLE OR POSITION	
NAME & ADDRESS OF EMPLOYER		NAME OF IMMEDIATE SUPERVISOR
REASON FOR LEAVING OR WANTING TO LEAVE:		
DESCRIPTION OF DUTIES & RESPONSIBILITIES INCLUDING NUMBER & TYPE OF EMPLOYEES SUPERVISED:		
<b>2</b> DATES OF EMPLOYMENT (Month, Day, Year) FROM _____ TO _____	EXACT TITLE OR POSITION	
NAME & ADDRESS OF EMPLOYER		NAME OF IMMEDIATE SUPERVISOR
REASON FOR LEAVING:		
DESCRIPTION OF DUTIES & RESPONSIBILITIES INCLUDING NUMBER & TYPE OF EMPLOYEES SUPERVISED:		



**PERSONAL REFERENCES**

NAME AND OCCUPATION	ADDRESS	TELEPHONE

Occasionally the form of an application blank makes it difficult for an individual to adequately summarize his/her complete background. If you have other skills, qualifications or comments which would assist us in evaluating your application, use the space below.

**PLEASE READ CAREFULLY  
APPLICANTS CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

\_\_\_\_\_  
Applicant Signature

**FOR PERSONNEL USE ONLY**

INTERVIEWER	DATE	COMMENTS



**CITY OF HUNTSVILLE  
BACKGROUND VERIFICATION DISCLOSURE**

As part of the employment process, the City of Huntsville, Alabama, may obtain a Consumer Report and/or an Investigative Consumer Report. The Fair Credit Reporting Act, as amended by the Consumer Reporting Act of 1996, requires that we advise you that, for purposes of employment only, a Consumer Report and/or an Investigative Consumer Report may be made which (may) include(s) information about your credit standing, credit capacity, character, general reputation, prior employment, personal characteristics, or mode of living. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided in the event the report contains information regarding your character, general reputation, personal characteristics, or mode of living.



**Police Department Use Only:**

**Check by:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**CITY OF HUNTSVILLE  
AUTHORIZATION FOR RELEASE OF INFORMATION**

I certify that I have received the Background Verification Disclosure, which my signature on this Authorization For Release of Information establishes my receipt of the same, and I hereby agree as follows:

During the application process and at any time during any subsequent employment, I hereby authorize the City of Huntsville, Alabama, to procure Consumer Reports from applicable consumer reporting agencies. I understand such reports may include information regarding my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. The reports may be compiled with information from credit bureaus, criminal court records, criminal records, court record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification to the extent such investigation includes information bearing on my character, general reputation, personal characteristics, or mode of living.

The following information is voluntary. However, without this information, the Consumer Reporting Agencies the City of Huntsville, Alabama, utilizes may be unable to properly identify you during the course of background searches. If information sufficient to enable such identification is not provided and interferes with the background search, your application for employment may be deemed incomplete and no further action may be taken with respect thereto.

Name (Print): \_\_\_\_\_  
(Last) (First) (Middle) (Maiden Name)

Current Address: \_\_\_\_\_  
(Number, Street, Apt. #) (City) (State) (Zip) (County)

Previous Address: \_\_\_\_\_  
(Number, Street, Apt. #) (City) (State) (Zip) (County)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Race/Ethnicity: \_\_\_\_\_  
(Asian, Black or African American, Hispanic or Latino, American Indian/Alaska Native, Two or More Races, Native Hawaiian/other Pacific, Other Race, or White)

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_  
(Required only if driving and having a valid driver's license is a necessary special requirement for the position)

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Position Applied For: \_\_\_\_\_ Department: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_