



Application for Employment

660 W. Main St. • P.O. Box 1209 • Los Lunas, NM 87031
 (505) 839-3840 • humanresources@loslunasnm.gov

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

How did you hear about this position:

| | | |
|-------------------------------|---------------------|---------------------------|
| Village of Los Lunas website | Employee Referral | Referred by: _____ |
| Valencia County News Bulletin | Local Communication | Communication name: _____ |
| Facebook post | Other | Explain: _____ |

PLEASE READ THIS BEFORE FILLING OUT THE APPLICATION FORM:

A new application must be submitted for each position for which you are applying. Resumes are not accepted in lieu of an application, but may be attached for supplemental information. All applications must be completed in their entirety. Any application not completed and/or incomplete and noted to “see resume” will be considered an incomplete application and will be disqualified.

This application is an important part of the employment process. Candidates for any position may be eliminated based on an evaluation of the application. Please type or complete in ink as neatly and clearly as possible. Answer all questions to the best of your knowledge. False, incomplete or inaccurate information is cause for disqualification or discharge. As part of the application process, the Village of Los Lunas may conduct background checks on all applicants.

Thank you for your interest in the Village of Los Lunas

If you need assistance completing this application, please contact Human Resources at (505) 352-7647.

| | |
|----------------------|---------------------|
| Position applied for | Date of Application |
|----------------------|---------------------|

Personal Information

| | | |
|----------------------------|-------------------------------|----------------|
| Last Name | First Name | Middle Name |
| Address Number Street | City | State Zip Code |
| Telephone Number Home Cell | Best Place to Leave a Message | |
| E-mail Address | | |

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

General Information

| | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| Are you 16 years old or over? If under 18, state age _____. | Yes | No |
| Have you ever been employed by the Village of Los Lunas before? If Yes, give date(s) _____ | Yes | No |
| List any relatives that currently work for the Village of Los Lunas... _____ | | |
| Can you, after employment, submit verification of your legal right to work in the United States? | Yes | No |
| Do you have a valid New Mexico driver's license? <i>Additional information will be required prior to employment.</i> | Yes | No |
| Do you have military experience? | Yes | No |
| Minimum salary desired _____ | | |
| Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. | | |
| Do you require any accommodations to perform the essential functions of the job? <i>If yes, please explain.</i> | Yes | No |
| _____ | | |

Education & Training

| High School/GED | | <i>Degree received</i> | | Yes | No |
|-----------------|-------------|------------------------|-----------------|-----|----|
| Name of School | City, State | Degree/Diploma | Course of Study | | |
| College | | <i>Degree received</i> | | Yes | No |
| Name of School | City, State | Degree/Diploma | Course of Study | | |
| Graduate School | | <i>Degree received</i> | | Yes | No |
| Name of School | City, State | Degree/Diploma | Course of Study | | |
| Other (Specify) | | <i>Degree received</i> | | Yes | No |
| Name of School | City, State | Degree/Diploma | Course of Study | | |

Describe any specialized training, apprenticeship skills and extra-curricular activities.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

| | | | |
|---------------------|------------|----------------------|--------------------------------------------------|
| Employer | | Job Title | |
| Address | | Reason for Leaving | |
| Telephone Number(s) | Supervisor | Dates Employed to | Hourly Rate/Salary <i>(Begin to Final)</i> to |
| Work Performed | | | |
| Employer | | Job Title | |
| Address | | Reason for Leaving | |
| Telephone Number(s) | Supervisor | Dates Employed to | Hourly Rate/Salary <i>(Begin to Final)</i> to |
| Work Performed | | | |
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| Address | | Reason for Leaving | |
| Telephone Number(s) | Supervisor | Dates Employed to | Hourly Rate/Salary <i>(Begin to Final)</i> to |
| Work Performed | | | |

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Professional References *Known to you for at least 3 years*

| | | |
|----|--------------------------|------------------|
| 1. | _____ | _____ |
| | (Name) | (Phone #/E-mail) |
| | _____ | _____ |
| | (Occupation/Association) | |
| 2. | _____ | _____ |
| | (Name) | (Phone #/E-mail) |
| | _____ | _____ |
| | (Occupation/Association) | |
| 3. | _____ | _____ |
| | (Name) | (Phone #/E-mail) |
| | _____ | _____ |
| | (Occupation/Association) | |

Applicant's Statement

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize all persons listed above (and on the accompanying resume, if any) to give the Village of Los Lunas any and all information concerning my previous employment and education and any pertinent information they may have, personal or otherwise, and release all parties, such persons and the Village of Los Lunas, from liability for any damage that may result from furnishing same to the Village of Los Lunas.

I understand and agree that I may be required to take a drug screening test. I hereby give my voluntary consent for a urine sample to be collected from me and submitted for testing. I also consent to the release of the test result to the Village of Los Lunas for its use. I understand that any positive drug test result may preclude my employment.

Signature of Applicant

Date

Consent to Procurement of Consumer Credit Report

I understand that, as a condition of my consideration for employment with the Village of Los Lunas ("Village"), or as a condition of my continued employment with the Village, the Village may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness.

I hereby authorize and consent to the Village's procurement of such a report. I understand that, pursuant to the federal Fair Credit Reporting Act, the Village will provide me with a copy of any such report if the information contained in such report is, in any way, to be used in making a decision regarding my fitness for employment with the Village. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report.

Signature of Applicant

Date

Printed Name of Applicant