



CITY OF LAKE WORTH, TEXAS

Application for Internship

PRINT IN BLACK INK OR TYPE. Fill out application completely, if questions are not applicable, enter 'N/A'. Do not leave questions blank. Be sure to sign when completed.

Last Name	First Name	Middle	Social Security Number	
Street Address	Apartment #	City	State	Zip
Phone #	E-Mail address			

Have you ever been employed by the City of Lake Worth? Yes No

If yes, show title of position held, department and period of employment: _____

Are you related to any employee of the City of Lake Worth, City Council, or any other Board or Commission member?

Yes No. If yes, list person and relationship: _____

EDUCATION AND TRAINING		
Name of High School:	City and State:	Are you a high school graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, do you have a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Technical/Trade School:	City and State:	Did you Graduate from Technical school? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of College or University:	City and State:	Did you Graduate from college? <input type="checkbox"/> Yes <input type="checkbox"/> No
Note Degrees and Types:	Total College Hours:	
Other Training Received: _____ _____ _____		

MILITARY

Have you ever served in the U.S. Armed Forces? Yes No. If yes, specify branch: _____

Dates of Active Duty: From _____ To _____ Rank at Discharge _____ Type of Discharge: _____

DRIVING AND CONVICTION RECORD

Driver License Number: _____ State: Type: _____ Expiration Date: _____

Have you been found guilty of any moving violations within the past 3 years? Yes No.

If yes, complete the following:

Charge	Date	Location

Have you ever been convicted of an offense other than a moving violation? Yes No. (An arrest or conviction of a crime will not automatically exclude you from employment, however omission of information will.)

If yes, complete the following:

Charge	Date	Location

KNOWLEDGE AND SKILLS

List your computer skills and software application experience: _____

List machines or equipment you have operated: _____

Special licenses or registrations: _____

List any additional technical skills or professional knowledge that would support your application: _____

REFERENCES

List at least 3 people who are not related to you who would have knowledge of your qualifications for this position, such as former co-workers, teachers, etc.

Name	City/State	Telephone Number	Business or Occupation

Return to: Lieutenant J.T. Manoushagian, 3805 Adam Grubb, Lake Worth, TX, 76135

Phone 817-255-7935, Fax 817-237-2180

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EMPLOYMENT HISTORY

Start with your current or most recent position. Include any military experience and account for all periods of employment and unemployment. Employer addresses must be complete mailing addresses, including city, state, and zip code. This page may be copied if additional space is needed. May we contact your present employer? Yes No N/A

Employer:	Start Date			End Date		
	Month	Day	Year	Month	Day	Year
Address, City, State, & Zip:	Position/Title:					
Employer's Phone Number:	Current/Final Salary or Wages:					
Immediate Supervisor's Name:	Reason for Leaving:					
Summary of Duties						

Employer:	Start Date			End Date		
	Month	Day	Year	Month	Day	Year
Address, City, State, & Zip:	Position/Title:					
Employer's Phone Number:	Final Salary or Wages:					
Immediate Supervisor's Name:	Reason for Leaving:					
Summary of Duties						

Employer:	Start Date			End Date		
	Month	Day	Year	Month	Day	Year
Address, City, State, & Zip:	Position/Title:					
Employer's Phone Number:	Final Salary or Wages:					
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Employer:	Start Date			End Date		
	Month	Day	Year	Month	Day	Year
Address, City, State, & Zip:	Position/Title:					
Employer's Phone Number:	Final Salary or Wages:					
Immediate Supervisor's Name:	Reason for Leaving:					
Summary of Duties						

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED.

1. I certify that my answers to the questions on my application for internship with the City of Lake Worth are true and complete to the best of my knowledge. Furthermore, I understand that any future internship is subject to termination if any of the above information is found to be false or inaccurate, regardless of the time that elapses before such false information is discovered.

2. I understand that an investigative report will be made and hereby authorize all persons, schools, companies, and consumer reporting agencies and other organizations to supply information concerning my background/previous employment and I release all such parties from all liability from any damages which may result from furnishing such information to the City of Lake Worth.

5. I understand that I have a right to disclosure of such information reported, as provided for by law. I understand and accept the conditions of this statement.

6. I understand that I am applying for a temporary, non-benefit eligible, unpaid, internship.

Signature of Applicant

Date