

Tupelo Airport Authority
2704 W. Jackson St.
Tupelo, MS 38801

Application for Employment

An Affirmative Action/Equal Opportunity Employer

Print all information – Attach additional sheets if necessary

Today's date

Name

Position(s) applying for (**must be currently posted opportunities**)

Social security number

Job Information

Are you available?

- Full-time
- Part-time (number of hours/days available each week: _____)
- Temporary

List any skills or qualifications you have that are related to the job(s) for which you are applying.

List any office machines, computer software/hardware, or equipment in which you are trained or have experience.

List any certifications or licenses - including driver's license - which you have that are related to the job(s) for which you are applying.

Are you able to perform the essential functions of the job(s) for which you are applying with or without reasonable accommodation?

- Yes
- No

Please describe accommodations: _____

Education

Circle highest level of education completed:

1 2 3 4 5 6 7 8 9 10 11 12 GED

Undergraduate:

Graduate:

1 2 3 4

1 2 3 4

Name of school

City and State

Graduation date

Major, Degree or Course

High

High

College

College

Other

Experience record

List your present or most recent employer first. Include Armed Forces and/or unpaid volunteer experience.

Employer

Street

City

State

Zip Code

Supervisor

Phone

May we contact?

Dates (from/to)

Hourly Rate/Salary

Reason for leaving

Job title

Job duties

Employer

Street

City

State

Zip Code

Supervisor

Phone

May we contact?

Dates (from/to)

Hourly Rate/Salary

Reason for leaving

Job title

Job duties

Employment continued.

Employer

Street

City

State

Zip Code

Supervisor

Phone

May we contact?

Dates (from/to)

Hourly Rate/Salary

Reason for leaving

Job title

Job duties

Employer

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Zip Code

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Phone

May we contact?

Dates (from/to)

Hourly Rate/Salary

Reason for leaving

Job title

Job duties

Signature Page

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

The employer does not lawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for six (6) months. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

I certify that all statements on this application are true and complete to the best of my knowledge and belief. I understand that any falsification of this application may be considered sufficient cause for rejection of my application or termination if I am employed. I understand and agree that if employed, my employment will be for no definite period and may be terminated at any time.

Signature

Date

For Personal Department Use Only

Date of Interview: _____

Remarks _____

Employed Yes No Date of Employment _____

Job Title _____ Pay Rate _____ Department _____

Date of Birth _____ By _____
Name and Title

Voluntary Affirmative Action Information

It is the policy of the Tupelo Airport Authority to provide equal employment to all qualified applicants and employees regardless of race, religion, color, sex, age, national origin, marital status, disability, special disabled veteran, Vietnam era veteran, or other eligible veteran status.

Your completion of the information below is entirely voluntary. This information is requested solely to enable the Tupelo Regional Airport to meet record keeping and affirmative action requirements under Executive Order 11246, as amended, Section 402 of Vietnam Era Veterans' Readjustment Assistance Act of 1974, Section 503 of the Rehabilitation Act of 1973, as amended, and the Americans with Disabilities Act. The information will be kept in strictest confidence. Return this form to Human Resources, Room 302, Main Building. **This information will not become a part of your personnel file. Inclusion or exclusion of any of the data will not affect any employment decision.**

Name (*please print*): _____

Gender (*check one*): **Male** **Female**

Race/Ethnic Group (*check one*):

- White:** (not of Hispanic origin) A person with origins in any of the original peoples of Europe, North Africa, or the Middle East who is not of Hispanic origin.
- Black:** (not of Hispanic origin) A person with origins in any of the black racial groups of Africa who is also not of Hispanic origin.
- Hispanic:** A person of Mexican, Puerto Rican, Cuban, South American, or other Spanish culture or origin, regardless of race.
- Asian or Pacific Islander:** A person with origins in any of the original people of the Far East, southeast Asia, the Indian subcontinent or the Pacific Islands, including China, Japan, Korea, the Philippine Islands and Samoa.
- American Indian or Alaskan Native:** A person with origins in any of the original peoples of North American and who maintains cultural identification through tribal affiliation or community recognition.

Special Disabled Veteran: **Yes** **No**

A person entitled to disability compensation for a disability rates at 30 percent or more, or rated 100 or 20 percent in the case of a veteran who has been determined under Section 1506 of Title 38, U. S. C. to have a serious employment handicap, or a person whose discharge or release from active duty was for disability incurred or aggravated in the line of duty.

Veteran of the Vietnam Era: **Yes** **No**

A person who (a) served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged or released therefrom with other than a dishonorable discharge, or (b) was discharged or released from active duty because of a service connected disability if any part of such active duty was performed between August 5, 1964 and May 7, 1975.

Disabled Individual: **Yes** **No**

A person who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment.

Other Eligible Veterans: **Yes** **No**

Veterans who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized.