

Are you legally eligible for employment in the United States?

Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, restrict your ability to work for the Town? Yes No

If Yes, please explain:

Do you have a valid driver's license? Yes No

If yes, License number _____ State _____ Exp. Date _____

Do you have a valid Commercial Driver's License (CDL)? Yes No

If yes, License number _____ State _____ Exp. Date _____

Is your license Class A Class B Class C

Job Skills and Qualifications:

Please list any skills and or qualifications you possess that may assist you in the position for which you are applying:

Education and Training:

Starting with your most recent school attended, provide the following information:

School (Include City and State)	Years Completed?	Did you Graduate?	Major / Minor / HS Diploma

Please list any special courses or training you had that may assist you in the position for which you are applying:

Are you certified or trained in a specific a skill, such as CPR? Yes No

Certifications: _____

Military:

Are you currently a member of the Armed Services: Yes No

Have you ever served as a member of the Armed Services: Yes No

If Yes to either of the above, please provide the following:

Total Years of Service: _____

Branch: _____

Military Rank: _____

Please list any special military training or skills not previously listed that may assist you in position for which you are applying:

Work History:

Are you currently employed? Yes No

Please explain any gaps in your employment history, other than those due to personal illness, injury, or disability:

Please list your work history beginning with your most recent position:

Employer: _____ Dates Employed: _____

Address: _____

Telephone Number: _____ Contact for reference? Yes No Later

Starting job Title / Final Job Title: _____

Starting / Final Salary: _____ / _____ Supervisor's Name: _____

Description of Duties: _____

What you liked most about your position: _____

What you like least about your position: _____

Reason for Leaving: _____

Employer: _____ Dates Employed: _____

Address: _____

Telephone Number: _____ Contact for reference? Yes No Later

Starting job Title / Final Job Title: _____

Starting / Final Salary: _____ / _____ Supervisor's Name: _____

Description of Duties: _____

What you liked most about your position: _____

What you like least about your position: _____

Reason for Leaving: _____

Employer: _____ Dates Employed: _____

Address: _____

Telephone Number: _____ Contact for reference? Yes No Later

Starting job Title / Final Job Title: _____

Starting / Final Salary: _____ / _____ Supervisor's Name: _____

Description of Duties: _____

What you liked most about your position: _____

What you like least about your position: _____

Reason for Leaving: _____

Employer: _____ Dates Employed: _____

Address: _____

Telephone Number: _____ Contact for reference? Yes No Later

Starting job Title / Final Job Title: _____

Starting / Final Salary: _____ / _____ Supervisor's Name: _____

Description of Duties: _____

What you liked most about your position: _____

What you like least about your position: _____

Reason for Leaving: _____

List three business/work references who are not relatives or previous supervisors. If you are not able to list three business/work references, list three school or personal references who are not related to you:

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Is there any other job-related information you would like us to know about you?

Applicant Statement:

I hereby declare the information provided by me in this application for employment is true, correct, and complete. I understand that if employed, any misstatement or omission of fact may result in my being disqualified or my being discharged. I also understand that I may be required to pass a medical examination, drug screening, or other testing requirements as a condition of employment.

I understand this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state, or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the right to terminate my employment at any time, with or without cause and with or 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 that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Town.

I expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions, and to otherwise verify the accuracy of all the information provided by me in this application, resume, or job interview. I hereby waive any and all legal rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other person, corporations, or organizations for furnishing such information about me.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

BY SIGNING THIS APPLICATION, YOU CERTIFY THAT YOU HAVE READ AND ACCEPT ALL TERMS OF THE FOREGOING APPLICANT STATEMENT.

Applicant's Signature _____

Date of Application _____