## **CURRENT INFORMATION**

(1) POSITION TITLE		TOD	AY'S DAT	E:	
(2) When will you be av	ailable for employment? (i.e. immediatel				
(3) Are you seeking	[ ] Full-time regular[ ] Part-time regul				
(4) NAME:	Last) (First	t)		Middle)	
(5) ADDRESS:		,	,	(viiddie)	
	Street & No. or P.O. Box	City		State	Zip
(6) HOME TEL $\#$ (	)	_ CELL TEL # ( )_			
E-MAIL ADDRESS		ue	(if appli	icable)	
	[] Yes [] No If NO, what is yo				
GENERAL I	NFORMATION answer, use the space under EXPLANATIO				
(8) Apart from absences	for religious observances, check conditi	ions that you are willing to	accept.		
Occasional: Regular: Frequent	[ ] night work [ ] weekend work [ ] night work [ ] weekend work [ ] weekend work	[] overtime [] rot	ating shifts ating shifts ating shifts	[ ] "on-call" [ ] "on-call" [ ] "on-call"	
(9) Have you ever been e If YES, what do	employed with the? epartment and when:?	[ ] Yes   ] No			
(10) Have you applied to	the before? e what position and when:	[ ] Yes	Jo.		
(11) Are you willing to ac	ccept a salary within the advertised norm	nal starting salary range?	[]Yes	[ ]No	
(12) Are you now or wer	e you previously related in any way to a me, relationship and department:	Town employee?	0 - 5	[ ]No	
	orm all of the duties of the job you have		[ ] Yes	[ ] No	
(14) Are you a U.S. Citize	en or do you currently have authorizatio	on to work in the U.S.?	[ ] Yes	[ ]No	
(15) Did you receive any If YES, please e	of your education or employment exper explain under EXPLANATIONS.	rience under another nam	e? [ ] Yes	[ ] No	
MILITARY					
Have you served in the m If YES, please p	uilitary? provide dates of service:				
Did you receive honorabl If NO, please ex	e discharge? [ ] Yes [ ] No				
				±	

## **EDUCATION**

Provide your complete history

(18) Have you r	eceived a high school diploma or	equivalent?			No.		State	
Education Beyond High School	Name and Location	Attended				Credit Certificate Earned or # Hours of Yrs.		
College(s) University(ies)					Yes No			Mino
Post- Baccalaureate Certificate					Yes No			
Graduate or Professional Schools					Yes No			
Fechnical Institutes, Internship, Other					Yes No			
19) Please li are appl	st any knowledge, skills, or abilitiving. Include skills with equipmental/clerical position, indicate typic	es you have the	nat you fee es you can word proce	operate essing s (e)	oplicable to the e. If you wish c ooftware packag	position f onsiderati ges known	or which you on for a and/or used.	
c) d)				(f) (g) (h)				

## REGISTRATIONS, LICENSES, CERTIFICATIONS

(20)	List fields of work for which	ch you have been registered, li	censed or certified:	
	Registration:	State:	No:	Exp. Date:
			No:	
(21)	Please list your VALID DI	RIVER'S LICENSE NUM	RFR and the state in	as issued. If you do not have a driver's  State:
(22)	Is your driver's license a Co	mmercial Driver's License? [	IVac I INC	
<u>EM</u>	PLOYMENT			
Record	your complete work history in the	e spaces below. If needed, addition	onal sheets containing the same info	ormation and in the same format are
employi in the c	ment history. ALL SPACES MU	most recent position. Include mi	ARKED N/A (not applicable). '	ormation and in the same format are nee. Be sure to account for gaps in your 'See attached resume' is NOT acceptable
A. CU	RRENT OR MOST RECE			
JOB TI	ITLE			Last Salary
Date em	nployed	Date Separated /Still	Starting Salary Currently Employed	Last Salary
Employ	er or company		Garrenay Employed	
Employ	er or company address		Telephone # (	
Name as	nd Title of most current superviso	Or .		
			of employees supervised by you	
REASO	N FOR LEAVING			
B. NEX	XT MOST RECENT EMPI	LOYMENT (or explain gap	in employment)	
JOB TI	TLE		Starting Salary	
Date em	ployed	Date Separated		
Limpioy	a or company			_)
Name an	d Title of most suggest :			
Full-time	for Yre Mos Dort ti	r		
If you we DUTIE	orked part-time, the number of ho S IN ORDER OF IMPORTA	e for: Yrs Mos # .  ours worked per week  NCE	of employees supervised by you	
REASON	N FOR LEAVING			
C. NEX	T MOST RECENT EMPL	OYMENT (or explain gap	in employment)	
IOB TIT	T.E.			
Date emr	ploved	D · C	Starting Salary	Last Salary
Employer	ployed	Date Separated		, and the same of
				)
Name and	d Title of most current supervisor			
Full-time	for: Yrs Moe Dank	f V 1		
If you wo	rked part-time the number of h	ior: Yrs Mos # c	f employees supervised by you	
	orked part-time, the number of ho S IN ORDER OF IMPORTA			
- ++11	L. OLULIK OF HVIPOKIA	NCE	AND THE STATE OF T	

REASON FOR LEAVING		
D. NEXT MOST RECENT EMPLOYMENT (or explain	gap in employment)	
IOB TITLE		
Date employed Date Separated_	Starting Salary	Last Salary_
Employer or company		
Employer or company Date Separated Employer or company address	Telephone # ()_	
Vame and Title of most current support		
Full-time for: Yrs Mos Part-time for: Vrs Mos	44 6 1	
If you worked part-time, the number of hours worked per week DUTIES IN ORDER OF IMPORTANCE	# or employees supervised by you	
REASON FOR LEAVING		
E. NEXT MOST RECENT EMPLOYMENT (or explain		
	gap in employment)	
OB TITLE	Starting Salary	T
Data Canana 1	Salary	Last Salary
mployer or company address		
ame and Title of most current supervisor		
ull-time for: Yrs Mos Part-time for: Vrs Mos	# of employees supervised by you	
f you worked part-time, the number of hours worked per week		
OUTIES IN ORDER OF IMPORTANCE		
EASON FOR LEAVING		
EASON FOR LEAVING		
EASON FOR LEAVING	gap in employment)	
EASON FOR LEAVING	gap in employment)	
EASON FOR LEAVING	gap in employment) Starting Salary	Last Salary
EASON FOR LEAVING	gap in employment)Starting Salary	Last Salary
EASON FOR LEAVING	gap in employment)Starting Salary	Last Salary
EASON FOR LEAVING	gap in employment)Starting SalaryTelephone # ()	Last Salary
EASON FOR LEAVING	gap in employment)Starting Salary Telephone # ()	Last Salary
EASON FOR LEAVING	gap in employment)Starting Salary Telephone # () # of employees supervised by you	Last Salary
EASON FOR LEAVING	gap in employment) Starting Salary Telephone # ()  # of employees supervised by you	Last Salary
EASON FOR LEAVING	gap in employment) Starting Salary Telephone # ()  # of employees supervised by you	Last Salary
EASON FOR LEAVING  DESCRIPTION FOR LEAVING  Date Separated	# of employees supervised by you	Last Salary
EASON FOR LEAVING  Date Separated  Date Separated  mployer or company mployer or company address ame and Title of most current supervisor ull-time for: Yrs Mos you worked part-time, the number of hours worked per week UTIES IN ORDER OF IMPORTANCE  EASON FOR LEAVING  3) Have you had disciplinary action taken against you in the pass If YES, explain under EXPLANATIONS. (A YES will 1	# of employees supervised by you  t 12 months? [] Yes [] No not automatically disqualify you.)	Last Salary
EASON FOR LEAVING	# of employees supervised by you  t 12 months? [] Yes [] No not automatically disqualify you.)	Last Salary
EASON FOR LEAVING  Date Separated  Date Separated  mployer or company mployer or company address ame and Title of most current supervisor ull-time for: Yrs Mos Part-time for: Yrs Mos you worked part-time, the number of hours worked per week  UTIES IN ORDER OF IMPORTANCE  EASON FOR LEAVING  BY As the you had disciplinary action taken against you in the pass If YES, explain under EXPLANATIONS. (A YES will refer to the pass of the pass	# of employees supervised by you  t 12 months? [] Yes [] No not automatically disqualify you.)  any job held? [] Yes [] No	Last Salary
EASON FOR LEAVING  Date Separated  Date Separated  mployer or company mployer or company address ame and Title of most current supervisor ull-time for: Yrs Mos Part-time for: Yrs Mos you worked part-time, the number of hours worked per week  UTIES IN ORDER OF IMPORTANCE  EASON FOR LEAVING  BY As the you had disciplinary action taken against you in the pass If YES, explain under EXPLANATIONS. (A YES will refer to the pass of the pass	# of employees supervised by you  t 12 months? [] Yes [] No not automatically disqualify you.)  any job held? [] Yes [] No	Last Salary
EASON FOR LEAVING	# of employees supervised by you  t 12 months? [] Yes [] No not automatically disqualify you.)  any job held? [] Yes [] No ry reasons? [] Yes [] No (A YES will not automatically disqualify disqualify youl)	Last Salary
EASON FOR LEAVING	# of employees supervised by you  # of employees supervised by you  # 12 months? [ ] Yes [ ] No not automatically disqualify you.)  any job held? [ ] Yes [ ] No ry reasons? [ ] Yes [ ] No (A YES will not automatically disqualify artists in (6).	Last Salary
EASON FOR LEAVING  Date Separated  Date Separated  Date Separated  mployer or company  mployer or company address  ame and Title of most current supervisor  all-time for: Yrs Mos Part-time for: Yrs Mos you worked part-time, the number of hours worked per week  UTIES IN ORDER OF IMPORTANCE  EASON FOR LEAVING  By Have you had disciplinary action taken against you in the pass  If YES, explain under EXPLANATIONS. (A YES will reference to the company of the c	# of employees supervised by you  # of employees supervised by you  # 12 months? [ ] Yes [ ] No not automatically disqualify you.)  any job held? [ ] Yes [ ] No ry reasons? [ ] Yes [ ] No (A YES will not automatically disqualify artists in (6).	Last Salary
EASON FOR LEAVING  Date Separated  Date Separa	# of employees supervised by you	Last Salary
EASON FOR LEAVING  Date Separated  Date Separated  mployer or company mployer or company address ame and Title of most current supervisor coll-time for: Yrs Mos Part-time for: Yrs Mos you worked part-time, the number of hours worked per week  UTIES IN ORDER OF IMPORTANCE  EASON FOR LEAVING  BY A.) Have you had disciplinary action taken against you in the pass If YES, explain under EXPLANATIONS. (A YES will reference to the pass of t	# of employees supervised by you  # of employees supervised by you  # t 12 months? [ ] Yes [ ] No not automatically disqualify you.)  any job held? [ ] Yes [ ] No ry reasons? [ ] Yes [ ] No (A YES will not automatically disqualify an interview (if granted)? [ ] Yes [ A (). If NO, explain under EXPLA]	Last Salary y you.)  J No NATIONS.
EASON FOR LEAVING  Date Separated Da	# of employees supervised by you  # of employees supervised by you  # 12 months? [ ] Yes [ ] No not automatically disqualify you.)  any job held? [ ] Yes [ ] No ry reasons? [ ] Yes [ ] No (A YES will not automatically disqualify an interview (if granted)? [ ] Yes [ A (). If NO, explain under EXPLA]	Last Salary
EASON FOR LEAVING  DB TITLE  ate employed  mployer or company  mployer or company address  ame and Title of most current supervisor  sull-time for: Yrs Mos Part-time for: Yrs Mos  you worked part-time, the number of hours worked per week  UTIES IN ORDER OF IMPORTANCE  EASON FOR LEAVING  BY A.) Have you had disciplinary action taken against you in the pass  If YES, explain under EXPLANATIONS. (A YES will read to the supervisor of the pass of the	# of employees supervised by you	Last Salary y you.)  J No NATIONS.

REF	ERENCES	
(26)	Name (last, first) Address	

Name (last, first)

Name (last, first)

Address\_

(28)

Phone Number	
Relationship	
Phone Number	

## Certification and Release (MUST BE SIGNED AND DATED BELOW)

• To the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly or negligently misrepresented, falsified or omitted any information during the application process, or have made any changes to the format or wording of this application form, I may be disqualified for employment consideration or dismissed from employment with the Town.

Phone Number\_

- I authorize my current and former employers to give any information regarding me or my employment, whether or not it is on their records. I hereby release them from any damage whatsoever for issuing same.
- I also authorize educational institutions which I attended to reveal my scholastic ratings, as well as degrees or certificates earned, to the \_\_\_\_\_\_; and associations, registration and licensing boards and to others to furnish whatever detail is available concerning my qualifications. Notwithstanding any provision of State or Federal law, I expressly waive any right I have to review information the Town receives from an employer or educational institution under a promise of confidentiality.
- I also permit the \_\_\_\_\_\_ to conduct a Police, Court, Credit and/or Motor Vehicle Records Investigation of my background where related to the job for which I am applying.
- I understand that, if I am a final candidate, I will be tested for drug and alcohol use to determine if I am currently using or abusing these substances. I consent to the testing and understand that the results could preclude my appointment.
- I understand and acknowledge that should I be employed by the \_\_\_\_\_\_, then I serve "at will". This means that I may be terminated at any time with or without cause. I further understand that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically approved by the Town Manager

SIGNATUI	RE			DATE	