

# TOWN OF NORTH APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

DATE \_\_\_\_\_

Name \_\_\_\_\_  

Last
First
Middle
Maiden

Present address \_\_\_\_\_  

Number
Street
City
State
Zip

How long \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Date of Birth \_\_\_\_\_

Position applied for \_\_\_\_\_

Salary desired \_\_\_\_\_

Employment desired \_\_\_\_\_ Full-Time only \_\_\_\_\_ Part-Time only \_\_\_\_\_ Full- or Part-Time

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. Or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? (other than minor traffic offense) \_\_\_\_\_ No \_\_\_\_\_ Yes

If yes, explain the number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_

\_\_\_\_\_

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DO YOU HAVE A DRIVER'S LICENSE?     Yes     No

What is your means of transportation to work? \_\_\_\_\_

Driver's license  
 Number \_\_\_\_\_ State of issue \_\_\_\_\_     Operator     Commercial (CDL)

Expiration Date \_\_\_\_\_

Have you had any accidents during the past three years?     Yes     No    How many? \_\_\_\_\_

Have you had any moving violations during the past three years?     Yes     No    How many? \_\_\_\_\_

Please list two references other than relatives or previous employers.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____	_____
Telephone (____) _____	Telephone (____) _____

License/Certification	State	License Number	Date Expires

**Please list** any additional training you may have received, including military training, apprenticeship programs, vocational training, courses or seminars:

## APPLICATION FOR EMPLOYMENT – PAGE 3

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

**WORK EXPERIENCE** Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer, address and Phone number	Name of last supervisor	Employment dates	Pay or Salary
		From	Start
		To	Final
Your last job title			

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of employer, address and Phone number	Name of last supervisor	Employment dates	Pay or Salary
		From	Start
		To	Final
Your last job title			

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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Name of employer, address and Phone number	Name of last supervisor	Employment dates	Pay or Salary
		From	Start
		To	Final
Your last job title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

  

Name of employer, address and Phone number	Name of last supervisor	Employment dates	Pay or Salary
		From	Start
		To	Final
Your last job title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer?     Yes     No

Are you legally eligible for employment in the United States of America?     Yes     No

I certify that the information I have provided in this employment application is accurate and has been completed to the best of my knowledge and ability. I understand that any falsification, misrepresentation or omission in my interviews or any other employment record, will be sufficient reason to deny employment and/or may be reason for future dismissal.

Signature \_\_\_\_\_

Date \_\_\_\_\_