Application for Employment

Today's Date _____

Personal Information

Name _____ Cell Phone #: _____
(Last) (First) (Middle) Email Address: _____

Address _____
(Street) (City) (State) (Zip Code)

Are you 18 years of age or older? Yes ☐ No ☐

Are you legally eligible to work in the United States? Yes ☐ No ☐

Have you ever previously been employed by this Town? Yes ☐ No ☐ If yes, when? _____

Do you now or have you ever had a relative employed by this Town? Yes ☐ No ☐

If yes, who? _____

Have you ever been arrested or convicted of a crime that has not been expunged by a court?
Yes ☐ No ☐ If yes, please explain. _____

*Candidates selected for probable employment who are age 18 or older may be required to consent to a background check as a condition of employment.

Employment Desired

Position Desired:_____ Date Available to Work: _____
(Please list the title of the position as posted and do not leave blank or list "any.")

Status Desired: Full-time ☐ Part-time ☐ Desired Hourly Rate/Base Salary: _____

Are you available to work:
Weekday/daytime hours? Yes ☐ No ☐ Weekday/evening hours? Yes ☐ No ☐

Saturday? Yes ☐ No ☐ Sunday afternoon? Yes ☐ No ☐

Are you currently employed? Yes ☐ No ☐

If so, may we contact your present employer? Yes ☐ No ☐

Educational Information	**Name and Location of School**	**# of years attended**	**Degree Received**	**Subjects Studied/Major**
High School				
College or University				
Other (Technical/Trade School, Business School/Other				

APPLICANT'S PRINTED NAME: _____

Employment History: Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. Attach additional sheets of paper if needed. ***Incomplete information could disqualify you from further consideration.***

From: _____ To: _____
(Month/Year) (Month/Year)

Employer's Name: _____

Address: _____
(Street) (City) (State) (Zip Code)

Position/Title: _____ Part-time ☐ Full-time ☐

Briefly Describe Duties: _____

Reason for Leaving: _____ Rate of Pay: _____

Supervisor's Name/Title: _____

From: _____ To: _____
(Month/Year) (Month/Year)

Employer's Name: _____

Address: _____
(Street) (City) (State) (Zip Code)

Position/Title: _____ Part-time ☐ Full-time ☐

Briefly Describe Duties: _____

Reason for Leaving: _____ Rate of Pay: _____

Supervisor's Name/Title: _____

From: _____ To: _____
(Month/Year) (Month/Year)

Employer's Name: _____

Address: _____
(Street) (City) (State) (Zip Code)

Position/Title: _____ Part-time ☐ Full-time ☐

Briefly Describe Duties: _____

Reason for Leaving: _____ Rate of Pay: _____

Supervisor's Name/Title: _____

APPLICANT'S PRINTED NAME: _____

Other Skills/Memberships and Affiliations

Do you have any special skills, volunteer experience and/or training that would enhance your ability to perform the position applied for?
Yes ☐ No ☐
If so, please explain:
_____
_____

Do you hold a license or professional certification? Yes ☐ No ☐
If so, please specify:
_____
_____

Do you participate in any professional associations that would enhance your ability to perform the position applied for?
Yes ☐ No ☐
If so, please explain:
_____
_____

References: Please give the names of three persons not related to you, and preferably who you have worked with/for and whom you have known at least 3 years.

Name	Address/Phone/Email	Company Name	Years Known

Please read carefully before signing.

The Town of Shelburn is an equal opportunity employer. The Town of Shelburn does not discriminate in employment on account of race, color, religion, sex (pregnancy, gender identity, and sexual orientation), national origin, age (40 and over), disability, genetic information as referenced in the Genetic Information Nondiscrimination Act (GINA), military service veteran status or any other protected class as defined by federal, state, and local laws. The Town of Shelburn will comply with its obligation to provide reasonable accommodation to qualified individuals with disabilities.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes an obligation for the Town of Shelburn to hire me. If I am hired, I understand that either the Town of Shelburn or I may terminate employment at any time for any reason, with or without cause and without prior notice. I understand that no representative of the Town of Shelburn has the authority to make any assurance to the contrary. In addition, I understand that the Town of Shelburn utilizes the national E-Verify system to confirm my employment eligibility.

I attest with my signature below that I have given to the Town of Shelburn true and complete information on this application. No requested information has been concealed. I authorize the Town of Shelburn to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for denial of employment or immediate dismissal.

_____ _____

(Signature of Applicant) **(Date)**

Note: Applications for employment will be kept on file for three-years from the date of completion.