

# TOWN OF STRATTON

## EMPLOYMENT APPLICATION

### PERSONAL INFORMATION

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip

Phone \_\_\_\_\_ Social Security Number \_\_\_\_\_

### WORK PREFERENCE

Kind of work desired \_\_\_\_\_ Salary or pay you expect \_\_\_\_\_

Describe your prior experience in the kind of work you want. \_\_\_\_\_  
\_\_\_\_\_

Describe any formal schooling or training for this work. \_\_\_\_\_  
\_\_\_\_\_

List any licenses, security or bonding clearance or certificates you may have. \_\_\_\_\_  
\_\_\_\_\_

Office skills (typing, machine operation, etc.) \_\_\_\_\_

Referral Source:  Friend  Relative  Employment Agency  Other \_\_\_\_\_

### AVAILABILITY FOR WORK

Date available for work \_\_\_\_\_  Full-time  Part-time  Temporary

Shifts or times you will work:  Day  Afternoon  Graveyard  Rotating  Weekends  Holidays

Will you work daily overtime on occasion if necessary?  Yes  No

Will you work extra days in the week if necessary?  Yes  No

Do you have any continuing military obligations such as National Guard or Reserve which might affect your work schedule?  Yes  No

Do you plan to work elsewhere or attend school while working here?  Yes  No

### PRESENT EMPLOYMENT

(Use additional sheets for any explanations you may wish to give about answers given below.)

Are you presently employed?  Yes  No

How much advance notice do you wish to give to your present employer? \_\_\_\_\_

Do you authorize us to contact your present employer as a reference?  Yes  No

### PRIOR EVENTS

Have you ever worked for this municipality before?  Yes  No

Do you authorize us to contact your previous employers for references?  Yes  No

Have you earned any pension or retirement credits other than Social Security in any prior employment?  Yes  No

Have you ever been discharged for cause?  Yes  No

OTHER PERSONAL DATA

Do you have any friends or relatives working for this municipality? \_\_\_\_\_

Hobbies/Interests \_\_\_\_\_

SECURITY AND CITIZENSHIP

Can you, after an offer of employment, submit a birth certificate or other proof of U.S.citizenship?  Yes  No

If not, are you legally permitted work in the U.S.?  Yes  No

If you are a citizen of the United States and are hired to work, you will be required within three working days to furnish documentation that you are a legal resident and are legally entitled to work in the U.S.

Have you ever been indicted or convicted of a law violation other than a minor traffic violation? (A criminal record does not automatically bar employment.)  Yes  No

EDUCATION AND TRAINING

If this information is included on an attached resume, please disregard this section.

High School

Name of Last High School \_\_\_\_\_ Location \_\_\_\_\_  
Circle highest year completed 1 2 3 4 5 6 7 8 9 10 11 12 Average Grade \_\_\_\_\_  
Date left \_\_\_\_\_ Special courses (typing, technical, etc.) \_\_\_\_\_

College or University

Name \_\_\_\_\_ Location \_\_\_\_\_  
Years attended \_\_\_\_\_ Degree \_\_\_\_\_ Date left \_\_\_\_\_  
Major subject \_\_\_\_\_ G.P.A. \_\_\_\_\_

Other (Graduate, Trade School, Correspondence School, etc.)

Name \_\_\_\_\_ Location \_\_\_\_\_  
Length of course \_\_\_\_\_ Was course completed? \_\_\_\_\_ Date \_\_\_\_\_  
Subject \_\_\_\_\_ Scholarship average \_\_\_\_\_

EMPLOYMENT & U.S. MILITARY SERVICE RECORD

Please complete this section even if you have attached a resume. Give a complete account of your full-time employment. Begin on the first line with your PRESENT OR MOST RECENT POSITION AND WORK BACK.

1. Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Main duties \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Starting Pay \_\_\_\_\_ Leaving Pay: \_\_\_\_\_  
Why did you leave? \_\_\_\_\_

2. Employer \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Main duties \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Starting Pay \_\_\_\_\_ Leaving Pay: \_\_\_\_\_

Why did you leave? \_\_\_\_\_

3. Other positions and periods of unemployment

Employer: \_\_\_\_\_ Main Duties \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Pay \_\_\_\_\_ Why you left \_\_\_\_\_

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From \_\_\_\_\_ To \_\_\_\_\_ Pay \_\_\_\_\_ Why you left \_\_\_\_\_

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From \_\_\_\_\_ To \_\_\_\_\_ Pay \_\_\_\_\_ Why you left \_\_\_\_\_

PERSONAL INFORMATION

Information in this section is required only after employment for personal records.

Number of dependents \_\_\_\_\_ Marital status: \_\_\_ Single \_\_\_ Married \_\_\_ Divorced \_\_\_ Widowed  
Date of birth \_\_\_\_\_ Sex \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_  
Person to notify in case of emergency \_\_\_\_\_ Phone \_\_\_\_\_  
Name of spouse (if any) \_\_\_\_\_ Spouse's employer \_\_\_\_\_ Phone \_\_\_\_\_  
Name of personal physician \_\_\_\_\_ Phone \_\_\_\_\_

CERTIFICATE OF APPLICANT

(Read carefully before signing.)

All information provided by me is true and correct to the best of my knowledge. I understand omissions or misrepresentations may be cause for rejection or, if employed, may be just cause for subsequent dismissal. I hereby authorize any former employer, person, firm or corporation listed hereon including this municipality to answer any and all questions and agree to hold all persons harmless for giving any and all truthful information within their knowledge or records. I understand this is a preliminary application and not a contract to employ me. Furthermore, in the event I am employed, my employment shall be completely voluntary and may be terminated at will at any time upon notice by either myself or the municipality. I agree to comply with all reasonable rules of the municipality as a condition of continued employment. In the event the municipality advances me money or other things of value, or I otherwise become financially indebted to the municipality, I agree to repay the municipality and also that any wages due me upon termination may be offset by payroll deduction against any such monies due the municipality.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

Qualified applications receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, creed, color, national origin, religion, age, or sex, etc., as prohibited by law or regulation.

"AN EQUAL OPPORTUNITY EMPLOYER"

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CHARACTER REFERENCES:

Do not use former employers or relatives.

NAME	ADDRESS	PHONE	OCCUPATION	YEARS KNOWN

I authorize [employer] to contact any or all of my former employers or any or all of the references I have supplied to it, for the purpose of verifying any of the information I have provided to [employer] and/or for the purpose of obtaining any information whatever, whether favorable or unfavorable, about me or my employment with any former employer.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature