

TOWN OF WEARE, NH

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

PLEASE PRINT			
Position(s) Applied For _____		Date of Application _____	
How Did You Learn About Us?			
_____Advertisement	_____Friend	_____Walk-In	
_____Employment Agency	_____Relative	_____Other _____	
Last Name		First Name	Middle Name
Address		City	State Zip Code
Telephone Number(s)		Social Security Number	

-If you are under 18 years of age, can you provide required proof of your eligibility to work? _____Yes _____No

-Have you ever filed an application with us before? _____Yes _____No

If yes give date _____

-Have you ever been employed with us before? _____Yes _____No

If yes give date _____

-Are you currently employed? _____Yes _____No

-May we contact your present employer? _____Yes _____No

-Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? _____Yes _____No

Proof of citizenship or immigration status will be required upon employment

- On what date would you be available to work? _____

- Are you available to work: _____ Full Time _____ Part Time _____ Shift Work _____ Temporary

- Are you currently on "lay-off" status and subject to recall? _____Yes _____No

- Can you travel if a job requires it? _____Yes _____No

- Have you been convicted of a felony within the last 7 years? _____Yes _____No

Conviction will not necessarily disqualify an applicant from employment

- If yes, please explain _____

Education

Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School			
High School			
Undergraduate College			
Graduates Professional			
Other (Specify)			

Indicate any foreign languages you can speak, read and/or write

Fluent

Good

Fair

Speak

Read

Write

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States Military.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

1. _____			
Employer	Address		Telephone Number
Dates Employed	Hourly Rate/Salary	Job Title	Name of Supervisor
Work Performed			Reason for Leaving
2. _____			
Employer	Address		Telephone Number
Dates Employed	Hourly Rate/Salary	Job Title	Name of Supervisor
Work Performed			Reason for Leaving
3. _____			
Employer	Address		Telephone Number
Dates Employed	Hourly Rate/Salary	Job Title	Name of Supervisor
Work Performed			Reason for Leaving
4. _____			
Employer	Address		Telephone Number
Dates Employed	Hourly Rate/Salary	Job Title	Name of Supervisor
Work Performed			Reason for Leaving

If you need additional space, please continue on a separate sheet of paper.

<p>List professional, trade, business or civic activities and offices held. <i>You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:</i></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
--

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "*at will*" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview? ____ Yes ____ No

Remarks _____

Employed? ____ Yes ____ No Date of Employment _____

Job Title _____ Hourly Rate/Salary _____

Department _____ By _____

Name & Title

Date _____