

**Town of Poland
Application for Employment**

| | | | | |
|---|---|--|------------------------|----------------|
| Pe rs on al Inf or ma tio n | Name | | Date | |
| | Current Address | | Home Phone Number () | |
| | | | Work Phone Number () | |
| | Previous Address | | Social Security Number | |
| | | | | |
| | Are you prevented from being lawfully employed in the United States? | | | [] Yes [] No |
| | Are you 18 years of age or older? | | | [] Yes [] No |
| | For reference purposes, have you worked or attended school under a former name? If yes, please list former name: | | | [] Yes [] No |
| | Have you ever applied here before? If yes, when? | | | [] Yes [] No |
| | Have you ever been employed here before? If yes, when? | | | [] Yes [] No |
| Are any relatives currently employed here? If yes, give full name: | | | [] Yes [] No | |
| Are you able to perform the essential functions of the job you are applying for? If no, what accommodation would assist you? | | | [] Yes [] No | |
| How did you hear about the company? | | | | |

| | Type of School | Name and Location | Did you graduate? | Grade Average | Major/Minor |
|--|---------------------------------------|-------------------|-------------------|---------------|-------------|
| Edu catio n, Train ing and Spec ial Skill s | High School | | [] Yes [] No | | |
| | Trade School or Junior College | | [] Yes [] No | | |
| | College or University | | [] Yes [] No | | |
| | Graduate School | | [] Yes [] No | | |
| | Military or Other | | [] Yes [] No | | |
| | Seminars and Classes | | | | |
| | Professional License or Certification | | | | |
| | Software or Equipment | | | | |

| Objectives | Employment Preference | | |
|-------------------|-----------------------|---|------------------|
| | Position Desired | | Earnings Desired |
| | Location Desired | Are you available to travel? [] Yes [] No | |
| | | Are you willing to relocate? [] Yes [] No | |
| Career Objectives | | | |

List employment history for the last 10 years, starting with most recent employment.

| | | | | |
|--------------------|--|-------------------------|-------------------------|--|
| Employment History | Employer | | Phone Number () | |
| | Address | | Start Date (month/year) | |
| | | | End Date (month/year) | |
| | Supervisor Name and Phone Number | | Starting Salary | |
| | | | Ending Salary | |
| | May we contact this employer? [] Yes [] No | | Last Bonus or Incentive | |
| | Title or Position | | | |
| | Duties and Responsibilities | | | |
| | Reason for Leaving | | | |
| | | | | |
| | Employer | | Phone Number () | |
| | Address | | Start Date (month/year) | |
| | | | End Date (month/year) | |
| | Supervisor Name and Phone Number | | Starting Salary | |
| | | | Ending Salary | |
| | May we contact this employer? [] Yes [] No | | Last Bonus or Incentive | |
| | Title or Position | | | |
| | Duties and Responsibilities | | | |
| | Reason for Leaving | | | |
| | | | | |
| Employer | | Phone Number () | | |
| Address | | Start Date (month/year) | | |

| | | | | | |
|---|--|--|-------------------------|--|--|
| E m p l o y m e n t H i s t o r y | Address | | End Date (month/year) | | |
| | Supervisor Name and Phone Number | | Starting Salary | | |
| | | | Ending Salary | | |
| | May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Last Bonus or Incentive | | |
| | Title or Position | | | | |
| | Duties and Responsibilities | | | | |
| Reason for Leaving | | | | | |

| | | | | |
|---|---|------------------------------|-----------------------------|-------------------------|
| E m p l o y m e n t H i s t o r y | Employment history continued - please include the last 10 years. | | | |
| | Employer | Phone Number () | | |
| | Address | Start Date (month/year) | | |
| | | End Date (month/year) | | |
| | Supervisor Name and Phone Number | Starting Salary | | |
| | | Ending Salary | | |
| | May we contact this employer? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Last Bonus or Incentive |
| | Title or Position | | | |
| | Duties and Responsibilities | | | |
| | Reason for Leaving | | | |

| | | | | | |
|--|--|---------|--------------|------------|------------------|
| R e f e r e n c e s | Please list references, do not include family members or people who live with you. | | | | |
| | Name | Address | Phone Number | Occupation | Years Acquainted |
| | | | | | |
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Important, please read carefully and sign.

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I certify the information contained in this application is true and complete to the best of my knowledge. Any misrepresentation or omissions of any fact in my application can be justification for refusal of employment or if employed grounds for termination.

I authorize the company to investigate all statements contained in this application and release all parties from any liability for any damage that may result from furnishing same to you.

I understand that my employment may be terminated with or without cause or notice, at any time, at the option of either the Company or myself.

Signature _____

Date