

Application for Employment

Today's Date _____ Personal Information Cell Phone #: Name_ (First) Email Address: (Last) Address (Zip Code) (City) (State) (Street) Are you 18 years of age or older? Yes Are you legally eligible to work in the United States? Yes If yes, when? _____ Have you ever previously been employed by this Town? Yes Do you now or have you ever had a relative employed by this Town? Yes If yes, who? _____ Have you ever been arrested or convicted of a crime that has not been expunged by a court? 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** Date Available to Work: Position Desired: (Please list the title of the position as posted and do not leave blank or list "any.") Desired Hourly Rate/Base Salary: __ Part-time Status Desired: Full-time Are you available to work: Weekday/evening hours? Yes No Weekday/daytime hours? Yes Sunday afternoon? No Saturday? No Are you currently employed? No If so, may we contact your present employer? Yes Subjects Degree # of years Name and Location of Received Studied/Major attended **Educational Information** School High School College or University Other (Technical/Trade School, Business

School/Other

APPLICANT'S PRINTED NAME: Employment History: Include your last seven (7) you the most recent and working backwards in time. A disqualify you from further consideration.	ears of employment history, including periods of unemployment, s ttach additional sheets of paper if needed. Incomplete information	starting with n could
From: To: (Month/Year)		
Employer's Name:		
Address: (Street) Position/Title:	(City) (State) (Zip Code) Part-time Full-time	
Reason for Leaving:	Rate of Pay:	
Supervisor's Name/Title:		
From: To:(Month/Year)		
Employer's Name:		
Address: (Street) Position/Title:	(City) (State) (Zip Code) Part-time Full-time	
	Rate of Pay:	
Reason for Leaving: Supervisor's Name/Title:		
From: To: (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:		

her Skills/Memberships and Affiliations	erform the position applied
her Skills/Memberships and Armations you have any special skills, volunteer experience and/or training that would enhance your ability to p	errorm the position of the
so, please explain:	
o you hold a license or professional certification? Yes No so, please specify:	
	tion applied for?
oo you participate in any professional associations that would enhance your ability to perform the posi	tion applied for
es No No No Son Please explain:	
30, presse 44	
	worked with for and whom
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.	
you have known at least 3 years. Address (Phone / Fmail Company Name	worked with/for and whom <u>Years Known</u>
you have known at least 3 years. Address (Phone / Fmail Company Name	
you have known at least 3 years. Name Address/Phone/Email Company Name	<u>Years Known</u>
Name Address/Phone/Email Please read carefully before signing. The Town of Winamac is an equal opportunity employer. The Town of Winamac does not discriminate practices on the basis of race, color, religion, sex (pregnancy, gender identity, and sexual orientation), disability, genetic information as referenced in the Genetic Information Nondiscrimination Act (GINA) any other characteristic protected by federal, state and local laws.	Years Known e in employment opportunitie , national origin, age (40 and 6 , military service veteran stat
Name Address/Phone/Email Please read carefully before signing. The Town of Winamac is an equal opportunity employer. The Town of Winamac does not discriminate practices on the basis of race, color, religion, sex (pregnancy, gender identity, and sexual orientation), disability, genetic information as referenced in the Genetic Information Nondiscrimination Act (GINA) any other characteristic protected by federal, state and local laws. I understand that neither the completion of this application nor any other part of my consideration for obligation for the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me. If I am hired, I understand that either the Town of Winamac to hire me.	Years Known e in employment opportunitie national origin, age (40 and , military service veteran state or employment establishes ar
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Note: Applications for employment will be kept on file for one year from the date of completion.

APPLICANTS

Please submit the following with your respective application:

- 1. High school diploma or G.E.D. equivalent (copy)
- 2. Copy of valid drivers license
- 3. Copy of birth certificate

Applicant required to submit to a background investigation.