

APPLICATION FOR EMPLOYMENT

Town Of Westville

An Equal Opportunity Employer

The Town Of Westville does not discriminate on the basis of race, color, gender, national origin, age, religion, or disability, in employment or the provision of services

Please type or print responses to all questions on this application form. Any application not completed in its entirety will be disqualified.

Position Sought _____

Last Name _____ First Name _____

Middle Initial _____ Former Name(s) _____

Address _____

City/State/Zip _____ Phone _____

Are you at least 18 years of age? Yes _____ No _____ Date Available To Start Work _____

Are you interested in Full-Time Work Yes _____ No _____

Part-Time Work Yes _____ No _____

Temporary Work Yes _____ No _____

EMPLOYMENT HISTORY AND WORK EXPERIENCE

Please list all employment history and work experience during the previous five years, beginning with your current employer. Failure to include all past employment may be grounds for disqualification.

If currently unemployed, please check here _____ and skip to Previous Employer Section.

Current Employer _____

Address _____

Phone _____ Hire Date _____ Job Title _____

Beginning Salary _____ per _____ Current Salary _____ per _____

Supervisor/Title _____ Phone _____

Briefly describe the work you do, such as duties, responsibilities, equipment operated, and promotions _____

Why do you want to leave? _____

May we contact your current employer? Yes _____ No _____ If no, please explain why: _____

Previous Employer _____

Address _____

Dates Employed _____ Job Title _____

Beginning Salary _____ per _____ Ending Salary _____ per _____

Supervisor/Title _____ Phone _____

Briefly describe the work you do, such as duties, responsibilities, equipment operated, and promotions _____

Reason for leaving? _____

May we contact this employer? Yes _____ No _____ If no, please explain why: _____

Previous Employer _____

Address _____

Dates Employed _____ Job Title _____

Beginning Salary _____ per _____ Ending Salary _____ per _____

Supervisor/Title _____ Phone _____

Briefly describe the work you do, such as duties, responsibilities, equipment operated, and promotions _____

Reason for leaving? _____

May we contact this employer? Yes _____ No _____ If no, please explain why: _____

Previous Employer _____

Address _____

Dates Employed _____ Job Title _____

Beginning Salary _____ per _____ Ending Salary _____ per _____

Supervisor/Title _____ Phone _____

Briefly describe the work you do, such as duties, responsibilities, equipment operated, and promotions _____

Why do you want to leave? _____

May we contact your current employer? Yes _____ No _____ If no, please explain why: _____

EDUCATION & TRAINING

This section is intended to give the employer information about education and training you have completed, and to describe your skills, knowledge and abilities to perform the duties of the position. (Please attach additional pages as needed).

High School Attended _____

Address _____

Diploma Earned? Yes _____ **No** _____ **GED Earned? Yes** _____ **No** _____

Activities/Awards _____

College or Trade School Attended _____

Address _____

Dates Attended _____ **Degree Earned** _____

Major/Minor Course(s) of Study _____

Activities, Awards, or Organization Memberships _____

College or Trade School Attended _____

Address _____

Dates Attended _____ **Degree Earned** _____

Major/Minor Course(s) of Study _____

Activities, Awards, or Organization Memberships _____

Seminars, workshops, or programs attended that may be relevant to the position you are seeking:

MILITARY SERVICE AND STATUS

If you have never served in the military, please check here _____ and skip to the next section.

Military Branch _____ Dates of Service _____

Highest Rank Attained _____ Rank at Separation _____

Type of Discharge: _____

Citations or Awards Received _____

PROFESSIONAL OR SPECIALIZED TRAINING

Please list any professional or specialized training, licensing, or certificates held

License/Certificate _____

Issued By _____ Date Issued _____

Expiration _____ Type _____ # _____

Has this license ever been revoked, suspended or terminated? _____

If yes, please explain _____

License/Certificate _____

Issued By _____ Date Issued _____

Expiration _____ Type _____ # _____

Has this license ever been revoked, suspended or terminated? _____

If yes, please explain _____

License/Certificate _____

Issued By _____ Date Issued _____

Expiration _____ Type _____ # _____

Has this license ever been revoked, suspended or terminated? _____

If yes, please explain _____

PROFESSIONAL AFFILIATIONS

Please list membership(s) of any current or previous affiliations or organizations and related office(s) or position(s) held.

Organization Name	Address	Phone	Office/Position Held
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PERSONAL INFORMATION

Do you have any commitments which might interfere with or adversely affect your employment with us, such as a second job or school?

_____ Yes _____ No If yes, please explain _____

PERSONAL REFERENCES

Please list three references who are not related to you and are not former employers or supervisors.

Name _____ Number of years known _____

Address _____

Home Phone _____ Cell Phone _____

Name _____ Number of years known _____

Address _____

Home Phone _____ Cell Phone _____

Name _____ Number of years known _____

Address _____

Home Phone _____ Cell Phone _____

CONVICTIONS

Have you ever been convicted of a criminal offense that has not been expunged, restricted or sealed by a judge? ___Yes ___No

Convicted means that you were declared guilty by a judge or you pleaded guilty in court. A conviction may have even taken place if you did not pay a fine or spend time in jail or in prison . A conviction could have been for a misdemeanor or a felony. Certain traffic offenses rise to the level of a misdemeanor or felony and must be declared; examples include driving under the influence, driving on a suspended license, reckless driving, leaving the scene of an accident, and vehicular homicide. A criminal history investigation is done on each new employee, and employment with the Town is conditional, subject to the findings of a criminal investigation history. Answering yes to this question does not automatically disqualify you for employment; however, information obtained from the investigation will be used in the employment review process.

If yes, you must disclose each offense: date, charge, city, state and disposition: (include type of offense (e.g., misdemeanor, felony) and judgment (e.g., guilty, conditional dismissal)).

I understand that an offer of employment from the Town will be contingent on the receipt and evaluation of the background check report. Disclosure of convictions within this application does not automatically disqualify me from employment; however, information obtained from the investigation will be used in the employment review process.

- Initials: _____

APPLICANT CERTIFICATION

Please read each of the following paragraphs carefully. Indicate your understanding of and consent to the contents and conditions of each paragraph by initialing in the space provided. If you have any questions regarding these paragraphs, contact us before initialing.

- I understand and accept that my employment with the Town Of Westville is conditional on passing any medical and/or psychological examinations that the employer deems necessary to determine my ability to perform the essential functions of the position. I understand and accept that this will include drug, alcohol or substance abuse testing, as well as, a criminal background check.

Initials: _____

- I understand that it may be necessary for me to approve and sign any waivers necessary in order for the employer to obtain information from my current and former employers.

Initials: _____

- I understand and accept that if any information required in this application is found to be falsified or intentionally excluded, my application may be disqualified from further consideration. I further understand and accept that if I am employed by the employer, I will be subject to disciplinary action, including termination, if any information required by this application has been falsified or intentionally excluded.

- Initials: _____

- I solemnly swear that all of the information furnished in this employment application is true, accurate, and complete to the best of my knowledge, I authorize investigation of all statements contained in this application. I understand that my misrepresentations or falsification of the information provided will lead to withdrawal of an employment offer or termination following employment.

- Initials: _____

By submitting this document, I hereby agree that I shall execute the employer's conditional and employment medical examination and drug testing consent requirements. I recognize that my employment with the employer will be jeopardized if I engage in substance abuse, illegal drug use, or alcohol abuse.

Applicant's Signature

Date