

Application For Employment

Employees for the Town of Eaton and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age.

PLEASE PRINT

Position applied for _____ Date _____

Full legal name _____ Home phone _____

Address _____

Have you been employed here before? Yes No If yes, give date _____

Are you employed now? Yes No May we contact your present employer? Yes No

On what date would you available for work? _____

Are you available to work Full Time Part Time Shift Work Temporary

Are you on a lay-off and subject to recall? Yes No

Can you travel if the job requires it? Yes No

Have you been convicted of a Felony within the last seven (7) years? Yes No

(Conviction will not necessarily disqualify applicant from employment)

If Yes, please explain _____

Are you or have you ever been in the U. S. Military Service? Yes No If Yes, Branch _____

Education

Highest Grade completed _____ Year completed _____

If you didn't complete high school, do you have equivalency diploma? Yes No

Date received _____

Number of years of post high school education. _____

Institution _____ Degree/Field of Study _____

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If you expect to complete an education program in the near future, please indicate what type of degree or program and expected completion date.

Use this space for any additional information you think would help us evaluate your application, including training, seminars, workshops and special achievements or specialized skills. _____

Licenses certificate or other authorization to practice a trade or profession to include driver's license.

Type	License Number	Granted by/State Issued

Have you ever been convicted for any violation of law, including moving traffic violations? ___ Yes ___ No

References

Names, addresses and relationships of three persons not related to you who know your qualifications.

Name	Address	Phone	Relationship

I understand and agree that, if hired, my employment with the Town of Eaton is known as an "at will" relationship. Simply stated, that means that we are working together for mutual benefit and either I or the Town of Eaton may discontinue the employment relationship at any time, with or without cause or advance notice.

Applicant's Initials _____

I understand that upon request I must submit to and pass a pre-employment drug screening. In the event I do not pass the pre-employment drug screening, the cost of the drug screening may be deducted from any pay earned during my employment. Furthermore, I understand that the Town of Eaton has a policy that permits random drug screening of its employees and in the event a future drug screening is not passed my employment will be terminated.

Applicant's initial's _____

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. I understand that this application is not and is not intended to be a contract of employment. In the event of employment. I understand that false or misleading information given 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 Town of Eaton.

Signature of Applicant _____ Date _____

Employment Experience Starting with the most recent.

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origins.

Employer	Telephone	Dates Employed		Work Performed
		From	To	
Address				
Job Title				
		Hour Rate/Salary		
Supervisor		Starting	Final	
Reason for leaving				

Employer	Telephone	Dates Employed		Work Performed
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If you need additional space, please continue on a separate sheet of paper.