

Town of Grover Taylor County

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for a township in the past? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Circle the days you are available to work: **MON TUES WED THURS FRI SAT SUN**

Education

High School	Years Attended	Field of Study	Degree
College/University/Technical	Years Attended	Field of Study	Degree

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Previous Employment

Start with your present or most recent employment and work back.
Use a separate sheet if necessary (*INCLUDE PAID AND UNPAID POSITIONS*)

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Do you have a current CDL with Class B endorsement? YES NO

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I understand that if any false information, omission, or misrepresentation are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. If necessary for employment, I understand that I may be required to: supply my birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.

Signature: _____ Date: _____