



## Your Education and Training

High School attended: \_\_\_\_\_

City State

Do you have a high school diploma? (Circle) yes no

Please list other education you have received:

College/University/ Trade or Business Schools Attended	City / State	Degree Earned/ Type of Degree	Major Area of Study

List other training received (special courses, work training programs, armed forces training, etc.): \_\_\_\_\_

List special qualifications and skills (licenses, computer skills, patents or inventions, publications, etc.): \_\_\_\_\_

Based on the job description of the position for which you are applying:

Are you able to perform the essential functions of the job for which you've applied (note: you may later be asked to demonstrate your ability to perform the essential functions)?

\_\_\_\_\_ Yes, but I will need reasonable accommodations in order to perform the essential functions (please complete the next question)

\_\_\_\_\_ Yes, and I will not need reasonable accommodations in order to perform the essential functions.

Please describe any accommodations you will need in order to adequately perform the essential functions of the position: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### References

Please list four persons, other than relatives or former employers who have knowledge of your character and/or abilities:

Name	Mailing Address	Yrs. Known	Phone

## Prior Employment Record

List below all present and past employment information:

Name and address of current or most recent employer:	
Phone number:	
Your supervisor:	
Your job title/responsibilities:	
Date hired:	Date left:
Reason for leaving:	
Starting salary:	Ending salary:
May we contact this employer:    yes    no	

Name and address of previous employer:	
Phone number:	
Your supervisor:	
Your job title/responsibilities:	
Date hired:	Date left:
Reason for leaving:	
Starting salary:	Ending salary:
May we contact this employer:    yes    no	

Name and address of previous employer:	
Phone number:	
Your supervisor:	
Your job title/responsibilities:	
Date hired:	Date left:
Reason for leaving:	
Starting salary:	Ending salary:
May we contact this employer:    yes    no	

Name and address of previous employer:	
Phone number:	
Your supervisor:	
Your job title/responsibilities:	
Date hired:	Date left:
Reason for leaving:	
Starting salary:	Ending salary:
May we contact this employer:    yes    no	

Name and address of previous employer:	
Phone number:	
Your supervisor:	
Your job title/responsibilities:	
Date hired:	Date left:
Reason for leaving:	
Starting salary:	Ending salary:
May we contact this employer:    yes    no	

**IMPORTANT**

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that falsified information or significant omission may disqualify me and my application from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

**This application for the position you are applying may require occasional or regular handling of monies for the Town; and you may be required to be bonded; further, you may be required to drive a Town vehicle for job related work; therefore, please complete the following:**

*Criminal Background Check Authorization*

I, the below signed job applicant, do hereby authorize the Town of Kingston Springs or its designee to conduct a criminal background check on me as a part of the job application process. I hereby authorize any law enforcement agency to release information, records and documents concerning any criminal charges brought against me.

Driver's License No.: \_\_\_\_\_ State: \_\_\_\_\_  
Applicant's Full Name: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_  
Applicant's Date of Birth: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I waive any right of privilege, privacy, and/or confidentiality I may have in the information provided by references or others whom I have indicated may be contacted.**

**Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**For Personnel Department Use Only**

Position(s) Applied for is open: (Circle) Yes No

Position(s) Considered For: \_\_\_\_\_  
\_\_\_\_\_

Arranged Interview: (Circle) Yes No

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Interviewer \_\_\_\_\_ Date \_\_\_\_\_

Employed: (Circle) Yes No Date of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_ Department: \_\_\_\_\_

Position: (Circle) Hourly Salaried

Rate: Hourly Rate: \_\_\_\_\_ Salaried: \_\_\_\_\_

Employed By: \_\_\_\_\_  
Name and Title

Date: \_\_\_\_\_