

Application for Employment

In compliance with Federal and State equal opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, citizenship or any other legally protected status.

Position(s) Applied for: 1st Choice	2 nd	Choice	Date of	Date of Application			
Applicant Information							
	11						
Last Name	First Name		Middle Name				
Gr. 4411	C'4		Gt. 4	7: C 1			
Street Address	City		State	Zip Code			
Home Telephone	Cellular	EMail					
Tione Telephone	Central	Livian					
L							
On what date would you be available to work? Desired Wage:\$per							
On what date would you be available to work? Desired Wage:\$per_							
Are you available to work:	Full Time		Part Time	on Call			
	1 un 1 mic			on cun			
What hours are you available to work:	Days	Evenings	Nights	Weekends			
Are you a U.S. citizen?YesNo If No, explain VISA or alien status							
	Educ	cation					
	Edu	audi					
Name of Institution	City	and State	Diploma/De	gree			
High School	City a	ind State	Diploma/DC	gree			
College							
Other							

Employment Experience

	start with your present or last employment	ilist	
Name of Business	Type of Business	Title/Position	
Address		Telephone Number	
Dates Employed	Salary (Hourly / Weekly / Monthly)	Supervisor's Name and Title	
Duties of your Position	Reason for Leaving		
Name of Business	Type of Business	Title/Position	
Address	Telephone Number		
Dates Employed	Salary (Hourly / Weekly / Monthly)	Supervisor's Name and Title	
Duties of your Position		Reason for Leaving	
		<u>'</u>	
Name of Business	Type of Business	Title/Position	
Address		Telephone Number	
Dates Employed	Salary (Hourly / Weekly / Monthly)	Supervisor's Name and Title	
Duties of your Position		Reason for Leaving	
In addition to your work history, are th or any creative or artistic skills (music,	ere other skills, qualifications or experience dance, etc.)	es we should consider i.e. computer software	

References

List names, add	lresses and relationship of three	persons not related t	o you who know you	r qualifications.	
Name	Address		Telephone	Relationship	
Name	Address		Telephone	Relationship	
Name	Address		Telephone	Relationship	
Do you have the ability to	perform the essential functions o	f the job for which y	ou are applying?	YesNo	
If no, please explain and d	escribe				
May we contact your prese	ent and/or previous employers?	Yes	No		
If no, please list					
If the position requires, do	you have the appropriate valid	drivers license?	Yes	_No (If No, skip to "A")	
Name on License	Drivers License Number	Туре	Sta	te of Issue	
Have you had any of the fo	ollowing driving violations in the	last (5) years:			
Driving while into	xicated/Impaired	Yes	No		
Leaving the Scene of an Accident		YesYes	No		
Reckless/ Careless Driving Speeding		Yes Yes	No No		
	or any citation received as the res				
Moving Violation		Yes Yes	No No		
If yes to any of the above of	lriving violations, please state				
In case of emergency, plea	se notify:				
		"A"			
omissions, or misinterpretation time. In consideration of my e and compensation can be term option. I also understand and notice, at any time by TOWN	nation submitted by me on this applies are discovered, my application may mployment, I agree to conform to TO initiated, with or without cause, and w agree that the terms and conditions of OF PLYMOUTH. I also understant that I will submit to drug testing to detail the control of the control	ication is true and com be rejected and, if I an WN OF PLYMOUTH's ith or without notice, at f my employment may d that the use of illega	n employed, my employs s rules and regulations, a any time, at either my be changed with or with l drugs is prohibited du	ment may be terminated at any nd I agree that my employment or TOWN OF PLYMOUTH's nout cause, and with or without ring employment. TOWN OF	
employment at TOWN OF P	nereby authorized to make any invest LYMOUTH is "at will" which mean r without prior notice, and for any reas	ns that either I or TO	WN OF PLYMOUTH		
Signature Date					