



Town of Evans

Employment Application

Incomplete information could disqualify you from further consideration. Please complete all fields.

		Date
Last Name	First Name	Middle Initial
Have you ever worked under a different name?		
Street Address	City, State, Zip	
Phone Number	Email Address	
Are you at least 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, you may be required to provide authorization to work.		
Are you eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No Proof of eligibility and identity will be required upon employment.		

Education	Degree Received	Field of Study
High School	<input type="checkbox"/> Yes Type: <input type="checkbox"/> No	
College	<input type="checkbox"/> Yes Type: <input type="checkbox"/> No	
Trade School	<input type="checkbox"/> Yes Type: <input type="checkbox"/> No	
Other	<input type="checkbox"/> Yes Type: <input type="checkbox"/> No	

Do you have any special skills, experience, and/or training that would enhance your ability to perform the position you are applying for? If so, please explain.

Have you ever worked for the Town of Evans? Yes No If so, when? _____

Do you know anyone who works for the Town of Evans? Yes No If so, who? _____

Have you ever been terminated or asked to resign by an employer? Yes No If so, please explain:



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Most Recent Employer	Start Date	End Date
Company Name	Phone Number	Supervisor's Name
Address	City, State, Zip	
Job Duties		
Job Title	Reason for Leaving	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Previous Employer	Start Date	End Date
Company Name	Phone Number	Supervisor's Name
Address	City, State, Zip	
Job Duties		
Job Title	Reason for Leaving	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Previous Employer	Start Date	End Date
Company Name	Phone Number	Supervisor's Name
Address	City, State, Zip	
Job Duties		
Job Title	Reason for Leaving	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Are you applying for a specific position? Yes No If so, please specify: _____

Please indicate which type of employment you are seeking: Full Time Part Time Seasonal

Why are you applying for this position? _____

How did you hear about this opportunity? _____

Please list the hours and days you are available to work: _____

Are there any specific times you cannot work? _____



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References	Phone Number	Company/Relationship	Number of Years Acquainted
Name			
Name			
Name			

Please read carefully before signing.

The Town of Evans (the Town) is an equal opportunity employer. The Town does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for the Town to hire me. If I am hired, I understand that either the Town or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of the Town has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to the Town true and complete information on this application. No requested information has been concealed. I authorize the Town to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date: _____ Signature: _____

THIS APPLICATION IS VALID FOR 90 DAYS FROM THE DATE SIGNED/DATED ABOVE.