

# **Town of Mendon**

2282 U.S. Route 4 Mendon, Vermont 05701 802-775-1662

www.mendonvt.gov

### **EMPLOYMENT APPLICATION**

#### PERSONAL INFORMATION

Name	Last	First	Middle	Date
Street Address	ss			
City/State Zi	p			-
Telephone		Ce	ell	Email
WORK PRI	EFERENCE			
Type of work	desired			
Expected sala	ary			
Describe you	ır prior exper	ience in the type	of work you want	
Describe any	formal school	oling or training f	for this work	
List any licer	nses, security	or bonding clear	ance or certificates yo	ou have.
Office skills	(typing, macl	nine operation, etc	c.)	
Referral sour	ce: ·Friend	·Relative ·E	mployment Agency	·Other

## AVAILABILITY FOR WORK

Date available for work 'Full-time 'Part-time 'Temporary
Shifts or times you will work:
·Day ·Afternoon ·Graveyard ·Rotating ·Weekends ·Holidays
Will you work daily overtime on occasion if necessary? 'Yes 'No
Will you work extra days in the week if necessary? 'Yes 'No
Do you plan to work elsewhere or attend school while working here? 'Yes 'No
PRESENT EMPLOYMENT (Use additional sheets for any explanations you may wish to give about answers given below.)
Are you presently employed? 'Yes 'No
How much advance notice do you need to give your present employer?
Do you authorize us to contact your present employer as a reference? ·Yes ·No
PRIOR EVENTS
Have you ever worked for this municipality before? 'Yes 'No
Do you authorize us to contact your previous employers for references? ·Yes ·No
If you have ever been discharged or if you have ever resigned from any employment, please identify the employer and state the reasons for the discharge and/or resignation.
OTHER PERSONAL DATA
Do you have any relatives working for this municipality? Yes ·No
CITIZENSHIP/AUTHORIZATION TO WORK
Can you, after an offer of employment, submit proof that you are legally permitted to work in the U.S.
under federal law? 'Yes 'No
(Please note that if you are hired to work, you will be required to furnish valid documentation that you are legally entitled to work in the U.S.)

## **EDUCATION and TRAINING**

# High School

Name of last h	nigh school				
Location					
Circle highest	year completed:	1 2 3 4 5 6 7	8 9 10 11 1	2 Average grade:	
Special course	es (typing, technic	al, etc.)			
College or Un	niversity				
Name					
Location					
Years attended	d	De	gree		
Major subjects	S			GPA	
Other (gradu	ate, trade school	, correspondenc	e school, etc.)	)	
Name				<del></del>	
Course length			Was course c	completed? 'Yes 'No	
Degree		Subject			
Grade average	·				
Please comple time employm	ent. Begin with y	en if you have att our <i>present</i> or <i>m</i>	ached a resum ost recent posi	RD  ne. Give a complete account of you itions and work back.	r full-
Supervisor			_ Telephone _		
Main duties					
				Ending Pay	
Why did you l	eave?				
2. Employer's	name and addres	s			
Supervisor			_ Telephone		

	ing Pay Ending Pay
Why did you leave?	
3. Other positions and periods of unemploym	nent:
Employer	
Main Duties	
From To	Pay
Why did you leave?	
Employer	
Main Duties	
From To	Pay
Why did you leave?	
Employer	
Main Duties	
From To	Pay
Why did you leave?	
Are you a veteran of the U.S. military service	e? ·Yes ·No
If so, Branch	Dates
Military training and experience relevant to j	ob applied for:

#### **CERTIFICATE OF APPLICANT** (Read carefully before signing.)

All information provided by me is true and correct to the best of my knowledge. I understand omissions or misrepresentations may be cause for rejection or, if employed, may be just cause for immediate dismissal. I hereby authorize any former employer, person, firm, corporation or educational institution listed hereon including this municipality to answer any and all questions, provide documents and agree to hold all persons harmless for giving any and all truthful information within their knowledge or records. I understand this is a preliminary application and not a contract for employment. Furthermore, in the event I am employed, my employment shall be completely voluntary and may be terminated at will at any time for any non-discriminatory reason upon notice by either myself or the municipality. I agree to comply with all reasonable rules of the municipality as a condition of employment.

Signature of Applicant	Date	<u></u>

The Town of Mendon is an equal opportunity employer. It is the policy of this Municipality to provide equal employment opportunity to all applicants and employees without regard to race, color, religion, national origin, sex, sexual orientation, ancestry, place of birth, age, disability, HIV status or other status protected by state or federal law. No question is asked on this application or during the application process for the purpose of excluding any applicant due to race, color, religion, national origin, sex, sexual orientation, ancestry, place of birth, age, disability, HIV status or other protected status under federal or state law.