

TOWN OF CARBONDALE

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

The Town of Carbondale provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training. Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Personal Information

Name

Address	City	State	Zip
Phone Number	Email Address		
Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No If hired, you may be required to submit proof of age.			
Social Security # (last 4 digits)	If hired, can you furnish proof that you are eligible to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Position

Position you are applying for	Available start date
Employment desired: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal/Temporary	
Have you ever applied here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?	
Were you ever employed here? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?	

If employed, do you expect to be engaged in any additional business or employment outside of our job? Yes No
If yes, give details.

List professional, trade, business or civic activities and offices held. Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability or other protected status.

For Driving Jobs ONLY

Do you have a valid driver's license? Yes No

Driver's License #	Class of Driver's License	State Licensed In
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Education

School Name	Location	Years Attended	Degree Received	Major

What skills or additional training do you have that relate to the job for which you are applying?

What machines or equipment can you operate that relate to the job for which you are applying?

Previous Employment

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers.

Name of Employer		Job Title & Duties	
Address		Dates of Employment (MO/YR – MO/YR)	
City, State, Zip Code			
Supervisor(s)		Telephone #	
Name of Employer		Job Title & Duties	
Address		Dates of Employment (MO/YR – MO/YR)	
City, State, Zip Code			
Supervisor(s)		Telephone #	
Name of Employer		Job Title & Duties	
Address		Dates of Employment (MO/YR – MO/YR)	
City, State, Zip Code			
Supervisor(s)		Telephone #	

Have you ever worked or attended school under any other names? Yes No

If yes, give names:

Are you presently employed? Yes No

If yes, whom should we contact?

Have you ever been fired from a job or asked to resign? Yes No

If yes, please explain:

Give three references, not relatives or former employers.

Reference Name	Address	Phone #

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre-and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment, it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND AND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESSED OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARENTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME, ONLY THE TOWN MANAGER OF THE ORAGNIZATION HAS THE AUTHORITY TO ENTERE INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE TOWN MANAGER AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature, electronic or otherwise, consent to these statements.

Signature:

Date: