## TOWN OF KREMMLING APPLICATION FOR EMPLOYMENT

## **An Equal Opportunity Employer**

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, sexual orientation, gender expression or identity, marital status, genetic information or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors.

questions. Use signature on ba	blank paper if you ack of application.	u do not have enoug In reading and ansv	h room on t vering the fo	his applicat Ilowing qu	pplication until you have answered tion. <b>PLEASE PRINT</b> , except for estions, be aware that none of the upon non-job-related information.	l all
Job Applied fo	r			_ Today's	s Date	
Are you seekin	g: Full-time 🗌	Part-time  Tem	nporary 🗌 e	employmen	ıt?	
When could yo	u start work?					
GENERAL						
	Last Name	First Name	Middl	e Name	Telephone Number	
	Present Street A	Address	City	State	Zip Code	
		_			Yes No	
	(If you are hired, you may be required to submit proof of age.)  If hired, you will be required to furnish proof of your eligibility to work in the U.S.					
	Have you ever ap	oplied here before?	Yes	No 🗌	If yes, when?	
	Were you ever e	mployed here?	Yes	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, giv	ve details:				

## **E**DUCATION

			Number of Years	Diploma/ Degree/
		List Name and Address of Schools	Completed	Certificate
	High School or GED			
	College or University			
	Subjects Studied			
	Vocational or Technical			
	Subjects Studied			
Special ski	LLS			
		skills or additional training do you have that are related hich you are applying?		
		mon you are apprying.		
		machines or equipment can you operate that are related hich you are applying?	-	
	For D	riving Jobs <u>Only</u> : Do you have a valid driver's license?.	Yes	□ No □
	Dri	ver's License Number Class of License	State Licens	sed In
		ve you had your driver's license suspended or revoked the last 3 years?		
	(Ex rel	rofessional, trade, business or civic activities and offices sclude labor organizations and memberships which reve igion, national origin, sex, age, disability, genetic inform tus.)	al race, color,	protected

## **W**ORK HISTORY

Name, Address and	Emp	oloyed	Supervisor(s)
Telephone of Employer	From (mo/yr)	To(mo/yr)	,
	Reason for Leaving		
	Theason for Leaving		
Title			
110			
Name, Address and	Emp	oloyed	Supervisor(s)
Telephone of Employer	From (mo/yr)	To(mo/yr)	
		·	
	Reason for Leaving		
	Theason for Leaving		
Title			
1110			
Name, Address and	Emp	oloyed	Supervisor(s)
Telephone of Employer	From (mo/yr)	To(mo/yr)	,
. ,			
	Reason for Leaving		<u> </u>
	Ticason for Leaving		
Title			
110			
Name, Address and	Emp	oloyed	Supervisor(s)
Telephone of Employer	From (mo/yr)	To(mo/yr)	
		·	
	Reason for Leaving		
	Tiedson for Leaving		
	i		
Title			

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H	lave you worked or attended school under any other names?	Yes No No
	If yes, give names:	
A	Are you presently employed?	Yes No
	If yes, whom do you suggest we contact?	
ŀ	lave 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.	
Name	Address	Phone
	AFFIDAVIT,CONSENT AND RELEASE	
	PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING	
	ormation provided in this employment application is true and complete. I ur omission may disqualify me from further consideration for employment are date.	
or not, any person, and opinions that m	stigation of any or all statements contained in this application. I also author school, current employer, past employers, and organizations to provide releasy be useful in making a hiring decision. I release such persons and organization statements.	evant information
	be required to successfully pass a drug screening examination. I hereby corment drug screen as a condition of employment, if required.	nsent to a pre-
complete pre-emplo	I am extended an offer of employment it may be conditioned upon my succeptance of examination. I consent to the release of any or all medical by to judge my capability to do the work for which I am applying.	
EMPLOYMENT DO GUARANTEE EMI ORGANIZATION H SPECIFIED PERIOR THE EMPLOYEE.	HAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, DES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF ENPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRHAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOY AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT TOWN THE PROPERTY OF WITH OR WITHOUT NOTICE.	MPLOYMENT NOR ESIDENT OF THE DYMENT FOR ANY E PRESIDENT AND THE WILL OF THE
I have read, under	stand, and by my signature consent to these statements.	
<b>J</b> 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	This application for employment will remain active for a limited time.  Ask the organization's representative for details.	