New Hire Application



Town of Hamilton Employment Application

GENERAL INFORMATION	ON:				
Position for which you ar	re applying:				
Date of application:					
Date available for emplo	yment:				
Desired Salary:					
			-		
What led you to apply fo		t Hamilton Town Hall	?		
Newspaper Advertiseme					
Referred by an employe	e:				
If yes, by whom? Other:					
Otner:					
PERSONAL INFORMAT	ΓΙΟΝ:				
Last Name		M.I.		First	
Social Security Number					
•					-
Address					
City			State		
Zip Code			Phone		
E-Mail					
Are you under 18? Yes I Are you a United States authorized to work by the Have you ever been con Have you been convicte	Citizen? Yes e United State of a fe	es Immigration and Nolony? Yes □ No □	Vaturalization Servic	ce? Yes □ full	
Have you ever been der	nied a fidelity l	bond? Yes □ No □	If yes, please exp	olain	

EDUCATION:	
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LDOOM THOM.			
	Name and Location	Dates	Grade completed/Degree
High School:			
College			
Conogo			
Trade or Business			
School			
Do you hold any Licens	es or Certifications?		
If yes, please list:			
EMPLOYMENT HISTO			
Are you presently emplo			
If so, may we contact yo	our present employer? Yes □ No		
Draviava amalaymant	places begin with most recent and	un la var	
	please begin with most recent em	Dates of employment:	T
Employer:		Dates of employment.	
Address:		Phone:	
Address.		Filone.	
Last position held:		Supervisor:	
Last position neid.		Supervisor.	
Responsibilities:			
Reason for leaving:			
Employer:		Dates of employment:	
l 7 -		p.y	
Address:		Phone:	
Last position held:		Supervisor:	
		·	
Responsibilities:			
Reason for leaving:			
Employer:		Dates of employment:	
Address:		Phone:	
Last position held:		Supervisor:	
Responsibilities:			
Reason for leaving:			

REFERENCES: Please list three (3) references (not related to you) that are familiar with you through previous employment or other associations.

Name:		Association:			
Phone:		Email if known:			
Name:		Association:			
Phone:		Email if known:			
Name:		Association:			
Phone:		Email if known:			
authorize the verification employment. I understa Further, I understand the		d any inquiries permissible by sion of facts requested in this affiliate employ me I am enter	 law to determine my suitability for application is cause for dismissal. ing an At-Will Employment 		
Applicant's Signature		Date:			
Please attach a copy of your resume.					
Please describe any job related skills or training not mentioned above:					