

Application for Employment

Employees of the Town and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, sex, national origin, age, marital status, or disability.

(Please Print or Type)

NOTE: If you will require special accommodation in order to apply for this position, please notify the Personnel Department prior to the deadline for submitting applications for this position.

Date: _____

PERSONAL

Position applied for:	Dept.:
Availability: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal <input type="checkbox"/>	
Full Name:	Social Security #:
Street Address:	Home Phone: ()
City: State: Zip:	Work Phone: ()
Have you ever been employed with us before?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, provide details here
Title of Position held:	Termination Date:

Reasons for leaving:

List any of your relatives who currently work for the Town of BRENTWOOD

Name	Department	Relationship

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Are you a citizen of the United States? Yes No

If no, can you provide proof that you are eligible to work in the United States, in accordance with the Immigration Reform and Control Act? Yes No

EDUCATION

Did you receive a high school diploma or GED? Yes No

Circle highest grade completed 5 6 7 8 9 10 11 12 College 1 2 3 4 5 6

	School (name, city, state)	Dates	Degree	Major/Minor
High School				
Undergraduate College/University			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Graduate/Professional College/University			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other Education: i.e. Technical, Business			Yes <input type="checkbox"/> No <input type="checkbox"/>	

DATE:

NAME:

EMPLOYMENT HISTORY

(List most recent employer first. Please account for any gaps in employment record)

Company:		Your Title:	
Street Address:		Employed From:	
City, State, Zip:		Employed To:	
May we contact your present employer?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Salary or Rate of Pay:	Starting: _____ Per _____ Ending: _____ Per _____
Responsibilities:			
Supervisor's name:		Phone No.:	
Reasons for leaving:			

Company:		Your Title:	
Street Address:		Employed From:	
City, State, Zip:		Employed To:	
Salary or Rate of Pay:	Starting	Ending	
Responsibilities:			
Supervisor's name:		Phone No.:	
Reasons for leaving:			

Company:		Your Title:	
Street Address:		Employed From:	
City, State, Zip:		Employed To:	
Salary or Rate of Pay:	Starting	Ending	
Responsibilities:			
Supervisor's name:		Phone No.:	
Reasons for leaving:			

Company:		Your Title:	
Street Address:		Employed From:	
City, State, Zip:		Employed To:	
Salary or Rate of Pay:	Starting	Ending	
Responsibilities:			
Supervisor's name:		Phone No.:	
Reasons for leaving:			

If needed, please attach additional sheets to include additional employment history

MILITARY	
Have you ever served in the U.S. Armed Forces?	Yes [] No []
If yes, what branch?	
Type of Discharge:	Rank at discharge:
Describe any training received which would be relevant to the position for which you are applying:	

SPECIFIC SKILLS	
List technical/professional licenses or certifications you hold:	
List office machines, heavy equipment, vehicles and other machinery you can operate:	
Indicate any specialized training you have received:	

DRIVING HISTORY (Use additional sheets as necessary)		
List ALL presently unexpired motor vehicle operator's licenses you hold		
License #:	Issuing State:	Expires: / / Type:
License #:	Issuing State:	Expires: / / Type:
Provide complete motor vehicle accident record for past 3 years		
Dates	Nature of Accident (Head-on, Rear-end, etc.)	
Last Accident:		
Next previous:		
Next previous:		
Indicate ALL traffic convictions during the past 3 years (other than parking violations):		
Location	Date	Description
Indicate dates of ALL license suspensions or forfeitures during the past 3 years		
Date	Type (Circle one)	
	Suspension/Forfeiture	
	Suspension/Forfeiture	

CRIMINAL HISTORY	
Have you ever been convicted of any violation of the law or uniform code of military justice other than minor traffic violations? No [] Yes []	
If yes, explain fully (Conviction will not automatically disqualify you from employment).	

(Use additional sheets if necessary)

REFERENCES

List three (3) personal references who are not former employers or related to you:

Name & Occupation	Address	Phone	Relationship

MISCELLANEOUS INFORMATION

Have you ever applied for a position with us before? Yes No

If Yes, give date and the position:

How did you find out about this employment opportunity?

- Brentwood Newsletter
- Town Job Posting
- Exeter Newsletter
- Manchester Union Leader
- Other (please specify):

ADDITIONAL INFORMATION

Use this space for any further information you think would help us evaluate your application:

CERTIFICATION AND AGREEMENT

PLEASE READ CAREFULLY BEFORE SIGNING

I CERTIFY that all entries on this application for employment and attachments are true and complete, and I agree and understand that any falsification of information herein, material half-truths, material misstatements or omissions regardless of their time of discovery, may cause forfeiture on my part to any employment with the Town of Brentwood. I understand that all information on this application is subject to verification and I consent to references and former employers and educational institutions listed being contacted regarding this application.

I AUTHORIZE the Town of Brentwood to obtain any information from schools, residential management agents, employers, criminal justice agencies, or individuals, relating to my activities. This information may include, but is not limited to, academic, residential, achievement, performance, attendance, personal history, disciplinary, arrest and conviction records (both juvenile and adult). Further, I hereby authorize all references, persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and accompanying resume and other documents supplied by me, if any) to provide the Town of Brentwood any relevant information that may be required to arrive at an employment decision. I understand that the information release is for the Town of Brentwood's use only.

I RELEASE any individual, including record custodians, from any and all liability for damages of whatever kind or nature which may, at any time, happen to me as a result of compliance, or any attempts to comply with this authorization.

Name of Applicant

Date

The Town of Brentwood is an Equal Opportunity Employer