Village of Downs

Employment Application

			Date	·	
Legal Name (Print)	FIRST	MIDDLE		PREFE	RRED NAME
and Security Number	8	Business Telephone ()		ext
	No				
Can your education and/or employment rec	 cords be verified using	ng the above name and social	security nu	umber? Yes	s No
if no, list other name(s) and/or social securi					
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Current Address	8		Phone	. ()	
NUMBER AND S Permanent Address		CITY, STATE, ZIP CODE	Phone	. ()	
NUMBER AND S Last three addresses (List most recent for		CITY, STATE, ZIP CODE			
NUMBER AND STREET	mer address metty	CITY, STATE, ZIP CODE		FROM (MO.YR.)	TO (MO./YR.)
				-	
Position (Job) applying for		ns or less Date available for			
Would you work: Full time Part	3 1 1 1				
Specify days and hours if part time					
Do you object to working beyond the hours					
Were you previously employed by the Villag					
Termination date Nan					
Have you previously applied for a position					
If yes, name at time of application					
Do you have a reliable way to get to work?				ii .	
Do you have a drivers license?					
Has your drivers license ever been suspend	ded or revoked?	Yes No If yes, date		:-	
Explain	11				
Have you been involved in any auto accide	nts in the last five y	ears?		☐ No	
Have you been convicted of or admitted gu	uilt to any moving vio	plations in the last five years?	Yes	☐ No If yes	s, explain
Have you ever entered a plea of guilty to, I	peen convicted of, o	r forfeited bond in relation to a	. felony or	any dishonest ad	ot?
Yes No If yes, specify offense,	date, and court			e service serv	
List any license(s) or training certificate(s) y					

Circle Last Year Completed	Trade or High School 9 10 11 12 GED	Technic		ss School, Colle 3 4 5	ge Gr	aduate Sch	
High School Name	Location			Did yo gradual ☐ Yes	e?	oint Average	
Total Control of the state of t		Dates	Date	College	College	Degree	Grade Point
List every Business, Trade School or College attended	Location	Attended (From-To)	Graduation	Major	Minor	Received	Average
					gar.	i	
Extracurricular Activities (Include o	offices held, awards, honors rece	ived, etc.):					
High School							
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College							5)
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CHECK SKILLS & TRAINING ACC	QUIRED						
Typing – WPM Errors	Personal Con	nputer Ope	ation	Account	ting	Prog	rammin
Other							e i salaga pri
DATES EMPLOYED		COMPANY NAME AND ADDRESS		SUPERVISO	R'S NAME	, TITLE, PH	IONE #
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Interpretational and business organizations to which you bidding. If you are currently employed, may your employer be contacted at this time for a reference? Yes		lunteer work experiences, special skills, and training onsideration.	
f you are currently employed, may your employer be contacted at this time for a reference? \[Yes \] No Have you ever been unemployed when you were not attending school full time? \[Yes \] No f yes, give dates and reasons What starting salary do you expect? \[S \] Per Give the names of three people who would be willing to provide an employment reference on your behalf. NAME / PHONE NUMBER ADDRESS OCCUPATION (Indicate street, city, state, and zip code) ()			
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	NAME / PHONE NUMBER		OCCUPATION
()	()		
I understand that the Village of Downs retains the sole right to determine terms and conditions of employment. No Trustee has the authority to enter into any employment agreement to the contrary. I also understand that Federal law prohibits the Village of Downs from hiring persons who are not authorized to work in the United States. I represent that I will possess unrestricted employment authorization and will provide the Village of Downs with documents verifying my identity and employment eligibility if and when I am offered employment. In addition, I understand that misrepresentations or false information on this application can result in discontinuation of employment consideration or, if I am employed, my discharge. I authorize the Village of Downs to contact: My previous employers The schools I attended The personal references I have listed to make any investigation of my personal, financial, and credit background necessary for the purpose of evaluating my qualifications for employment. This authorization and application for employment extends for six (6) months from today's date.	()		
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•	Date	Signature	