

# Town of Chatsworth

**AN EQUAL  
OPPORTUNITY  
EMPLOYER**

## APPLICATION FOR EMPLOYMENT

PRE EMPLOYMENT QUESTIONNAIRE

PLEASE PRINT LEGIBLY OR TYPE APPLICATION

PENCIL OR FAXED COPIES WILL NOT BE ACCEPTED

1. POSITION TITLE					OPTION	
2. LAST NAME		FIRST NAME		MI	3. SOCIAL SECURITY	
MAILINGS ADDRESS				COUNTY		4. BIRTHDATE (OPTIONAL)
CITY	STATE	ZIP CODE	5. HOME TELEPHONE		6. WORK TELEPHONE	
DRIVERS LICENSE NO.		STATE	CURRENT	NON-CDL	CDL	
				A B C D L M	A B	
7. Are you currently employed?					<input type="checkbox"/> yes <input type="checkbox"/> no	
8. Are you currently, or willing to become a citizen of Chatsworth?					<input type="checkbox"/> yes <input type="checkbox"/> no	
If your answer to any of the following questions is "yes" please attach a signed detailed explanation.						
9. Have you ever been fired from a job? (Downsize / layoff is not applicable)					<input type="checkbox"/> yes <input type="checkbox"/> no	
10. Have you ever been convicted of any criminal offense other than a minor traffic violation?					<input type="checkbox"/> yes <input type="checkbox"/> no	
convictions do not automatically disqualify job candidates, the seriousness of the crime and date of conviction will be considered						
<b>EDUCATION</b>						
list your education accurately and completely. DO NOT submit transcripts or degrees. The number of credits you have earned may be needed to meet minimum requirements for the position applied for.						
11. High School Graduate		<input type="checkbox"/> yes <input type="checkbox"/> no		YEARS COMPLETED	School	
				0 1 2 3 4		
12. BUSINESS OR TRADE SCHOOL		FROM	TO	SUBJECTS		COURSE
NAME AND ADDRESS		DATE	DATE			LENGTH
						COMPLETED
13. TECHNICAL / PROFESSIONAL LICENSE		NUMBER		STATE ISSUED	DATE ISSUED	EXPIRATION DATE
14. NAME AND ADDRESS OF COLLEGES / UNIVERSITIES ATTENDED		SEMESTER HOURS EARNED		MAJOR DO NOT ABBREVIATE	LEVEL OF DEGREE	DATES ATTENDED
UNDERGRADUATE						
GRADUATE						

Attach separate sheet of paper for additional information

15. **WORK HISTORY:** Complete this section in detail. Begin with the most recent payroll title and work backward. If you have an extensive work history with one employer, list each change of payroll title separately including duties and dates associated with each. Unsigned or incomplete applications will not be accepted. If additional space is needed attach a separate sheet using the same format. resumes submitted must be in the same format as this application . Include military experience if applicable.

<b>CURRENT (OR LAST) EMPLOYER</b>		<b>PAYROLL TITLE</b>				
STREET ADDRESS		NUMBER OF HOURS WORKED PER WEEK		CURRENT OR LAST SALARY - HOUR / WEEK / MONTH / ANNUAL		
CITY	STATE	DATES OF EMPLOYMENT				
		MONTH	YEAR	TO	MONTH	YEAR
<b>DESCRIBE DUTIES AND RESPONSIBILITIES FOR EACH PAYROLL TITLE SEPARATELY:</b>						

**REASON FOR LEAVING**

<b>CURRENT (OR LAST) EMPLOYER</b>		<b>PAYROLL TITLE</b>				
STREET ADDRESS		NUMBER OF HOURS WORKED PER WEEK		CURRENT OR LAST SALARY - HOUR / WEEK / MONTH / ANNUAL		
CITY	STATE	DATES OF EMPLOYMENT				
		MONTH	YEAR	TO	MONTH	YEAR
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CITY	STATE	DATES OF EMPLOYMENT				
		MONTH	YEAR	TO	MONTH	YEAR
<b>DESCRIBE DUTIES AND RESPONSIBILITIES FOR EACH PAYROLL TITLE SEPARATELY:</b>						

**REASON FOR LEAVING**

" I certify that the information contained in this applications is true and complete to the best of my knowledge, and I understand that if employed, falsified information on this application shall be grounds for dismissal. I authorize investigation of all information contained herein, and the references listed above to give you any and all information concerning my previous employment, and release all parties from all liability for any damage that may result from releasing information."

Signature of Applicant \_\_\_\_\_