



Town of Wolcott

Employment Application

APPLICANT INFORMATION											
Last Name			First			M.I.		Date			
Street Address					Apartment/Unit #						
City			State			ZIP					
Phone			E-mail Address								
Date Available			Social Security No.			Desired Salary					
Position Applied for											
Are you a citizen of the United States?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for the Town?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?						
Have you ever been convicted of a felony?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain						
EDUCATION											
High School			Address								
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>						
College			Address								
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
Other			Address								
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
REFERENCES											
<i>Please list three professional references.</i>											
Full Name			Relationship								
Company			Phone ()								
Address											
Full Name			Relationship								
Company			Phone ()								
Address											
Full Name			Relationship								
Company			Phone ()								
Address											

An Equal Opportunity Employer

PREVIOUS EMPLOYMENT

Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		

IN CASE OF EMERGENCY NOTIFY:

Name							
Phone Number							

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

Signature					Date		
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