

Application for Employment

Today's Date _____

Personal Information						
Name		Cell Phone #:				
(Last) (First)	(Middle)	Email Address:				
Address						
(Street)		(City)	(State)	(Zip Code)	
Are you 18 years of age or older? Yes	No					
Are you legally eligible to work in the Unit	ed States? Yes	No				
Have you ever previously been employed	by this Town? Yes	No	If yes, w	hen?		
Do you now or have you ever had a relative	ve employed by this T	own? Yes	No			
If yes, who?						
Have you ever been arrested or convicted	of a crime that has no	ot been expunged	by a court	:?		
Yes No If yes, please exp	olain					
*Candidates selected for probable employ condition of employment.	yment who are age 18	3 or older may be r	equired to	o consent to a bac	kground check as a	
Employment Desired						
Position Desired:		D	ate Availa	hle to Work		
(Please list the title of the	e position as posted a					
Status Desired: Full-time Part-time Desired Hourly Rate/Base Salary:						
Are you available to work: Weekday/daytime hours? Yes No Weekday/evening hours? Yes No						
Weekday, daytime nours. Tes		cenday, evening in	ours. res			
Saturday? Yes	No Su	inday afternoon?	Yes	No		
Are you currently employed?	Yes	No				
If so, may we contact your present emplo	yer? Yes	No				
	Name and Locat	- ,		Degree	Subjects	
Educational Information	School	attended	1	Received	Studied/Major	
High School College or University						
Other (Technical/Trade School, Business						
School/Other						

the most recent and working backwards in time. Atta disqualify you from further consideration.	ch additional sheets of paper if needed. <i>Inco</i>	mplete information could
From: To: (Month/Year) (Month/Year)		
Employer's Name:		
Address: (Street)	(City) (State)	(Zip Code)
Position/Title:	Part-time Full-time	
Briefly Describe Duties:		
Reason for Leaving:	Rate of Pay:	
Supervisor's Name/Title:		
From: To: (Month/Year) (Month/Year)		
Employer's Name:		
Address: (Street)	(City) (State)	(Zip Code)
Position/Title:	Part-time Full-time	
Briefly Describe Duties:		
Reason for Leaving:	Rate of Pay:	
Supervisor's Name/Title:		
From: To: (Month/Year) (Month/Year)		
Employer's Name:		
Address: (Street)		(Zip Code)
Position/Title:	Part-time Full-time	
Briefly Describe Duties:		
Reason for Leaving:	Rate of Pay:	
Supervisor's Name/Title:		

Employment History: Include your last seven (7) years of employment history, including periods of unemployment, starting with

APPLICANT'S PRINTED NAME: ___

APPLICANT'S PRINTED NAME:		
Other Skills/Memberships and Affiliations Do you have any special skills, volunteer experience and/or for? Yes No If so, please explain:	training that would enhance your ability to	o perform the position applied
Do you hold a license or professional certification? Yes If so, please specify:	No	
Do you participate in any professional associations that would yes No	uld enhance your ability to perform the pos	
References: Please give the names of three persons not rel you have known at least 3 years.	ated to you, and preferably who you have	worked with/for and whom
Name Address/Phone/Email	<u>Company Name</u>	<u>Years Known</u>
Please read carefully before signing.		
The Town of Nashville is an equal opportunity employer. The color, religion, sex (pregnancy, gender identity, and sexual cas referenced in the Genetic Information Nondiscrimination defined by federal, state, and local laws. The Town of Nashv qualified individuals with disabilities.	orientation), national origin, age (40 and ov n Act (GINA), military service veteran status	er), disability, genetic information or any other protected class as
I understand that neither the completion of this application obligation for the Town of Nashville to hire me. If I am hired employment at any time for any reason, with or without cau Town of Nashville has the authority to make any assurance the national E-Verify system to confirm my employment elig	d, I understand that either the Town of Nasuse and without prior notice. I understand to the contrary. In addition, I understand the	hville or I may terminate that no representative of the
I attest with my signature below that I have given to the Tov requested information has been concealed. I authorize the reference checks. If any information I have provided is untri- will constitute cause for denial of employment or immediate	Town of Nashville to contact references prue, or if I have concealed material informations.	ovided for employment
(Signature of Applicant)	(Date)	

Note: Applications for employment will be kept on file for three-years from the date of completion.