TOWN OF FARMINGTON

APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, color, creed, national origin, religion, age, gender, disability, marital or veteran status, or any other legally protected status.

THE TOWN OF FARMINGTON IS AN EQUAL OPPORTUNITY EMPLOYER

PLEASE PRINT CLEARLY								
Date:	Position(s) Applied For:	Social Security #						
Name: Last	First Middle	Home Telephone:						
Mailing Address:		Work Telephone:						
maining / tadiooo.		E-Mail Address:						
		E-Iviali Address.						
Are you currently employed?	☐ Yes ☐ No	If you are under 18 years of age, can you \(\subseteq \text{N/A} \subseteq \text{Yes} \subseteq \text{No} \) provide required proof of your eligibility to						
Are you currently on "lay-off" status a subject to recall?	and ☐ Yes ☐ No	provide required proof of your eligibility to work?						
May we contact you at your current Place of Employment?	☐ Yes ☐ No ☐ N/A	Are you prevented from lawfully becoming employed						
Best time to contact you:	Home: A.M./P.M. Work: A.M./P.M.	Have you been convicted of any crime other than a						
May we contact your present employer?								
Have you ever filed an application wibefore? If Yes, give date:		Date available for work:						
Have you ever been employed by the If Yes, give dates of employment and		Desired salary/wage range: \$per						
		Are you available to work:						
Do any members of your immediate the Town? If Yes, give names and re		☐ Full Time ☐ Part Time ☐ Temporary						
	EDUC	ATION						

School	Name & Address	Last Year Completed	Degree	Major
High School				
Trade, Business Or College				
Other (include training, Workshops, etc.)				

SKILLS/TRAINING									
What office machines can you operate?									
Do you have any computer experience? Yes No If yes, please explain:									
Other Skills?									
What heavy machinery can you operate?									
EMPLOYMENT HISTORY									
Canalassa Namas	A -l -l	(Starting with current or m							
Employer Name:	Address:		Reason For	r Leaving:	Dates Employed:				
Supervisor:	Talanhaaa				From://_ To://_				
Employer Name:	Telephone:	:	Poscon For	r Looving:	Position Held: Dates Employed:				
	Address.		Reason For Leaving:		From:// To://				
Supervisor:	Telephone:				Position Held:				
Employer Name:	Address:	•	Reason For Leaving:		Dates Employed:				
					Francis ()				
Supervisor:	Telephone:				From:// To:// Position Held:				
Employer Name:	Address:		Reason For	Leaving:	Dates Employed:				
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Supervisor:					FIOIII//_				
·	Telephone	•			Position Held:				
Employer Name:	Address:		Reason For Leaving:		Dates Employed:				
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Supervisor:	Talanhana								
	Telephone	: REFERE	NCES		Position Held:				
		(Please l							
Name:		Address:		Telephone:		Years Acquainted:			
Name:		Address:		Telephone:		Years Acquainted:			
Name:		Address:		Telephone:		Years Acquainted:			
		VERIFICATION 8	& RELEAS	E					
I certify that the answers I have provided in this application are true and complete to the best of my knowledge. I authorize investigation of all statements made herein, including contacting any reference, prior employer, school or military service and I authorize the release of any information in the possession or knowledge of such entities. I understand that any false or misleading information given in this application or in interviews may result in my termination.									
Signature of Applicant:				Date of Application:					