

Town of Eleanor
P.O. Box 185
Eleanor, WV 25070

Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or other legally protected status.

(Please Print)

| | | | |
|--|-----------------------------------|--------------------------------------|----------------|
| Position(s) Applied For | | Date of Application | |
| How Did You Learn About Us? | | | |
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Friend | <input type="checkbox"/> Walk-In | |
| <input type="checkbox"/> Employment Agency | <input type="checkbox"/> Relative | <input type="checkbox"/> Other _____ | |
| Last Name | First Name | Middle Name | |
| Address | Street | City | State Zip Code |
| Telephone Numbers | | Social Security Number | |
| Date of Birth | Drivers License Number | State | |

If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes No

Have you ever filed an application with us before?

Yes No

If Yes, give date _____

Have you ever been employed with us before?

Yes No

If Yes, give date _____

Are you currently employed?

Yes No

May we contact your current employer?

Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Yes No

On what date would you be available for work?

Yes No

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "Lay-Off" status and subject to recall?

Yes No

Can you travel if a job requires it?

Yes No

Have you been convicted of a felony within the last 7 years?
Conviction will not necessarily disqualify an applicant from employment

Yes No

If Yes, please explain _____

WE ARE AN EQUIL OPPORTUNITY EMPLOYER

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Education

| | Name and Address of School | Course of Study | Years Completed | Diploma Degree |
|------------------------------|----------------------------|-----------------|-----------------|----------------|
| Elementary School | | | | |
| High School | | | | |
| Undergraduate College | | | | |
| Graduate Professional | | | | |
| Other (Specify) | | | | |

| Indicate any foreign languages you can speak, read and / or write | | | |
|---|--------|------|------|
| | FLUENT | GOOD | FAIR |
| SPEAK | | | |
| READ | | | |
| WRITE | | | |

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

| | | | | | |
|--------------------|---------------------|------------|----------------------|-------|----------------|
| 1 | Employer | | Dates Employed | | Work Performed |
| | | | From | To | |
| | Address | | | | |
| | Telephone Number(s) | | Hourly Rate / Salary | | |
| | | | Starting | Final | |
| Job Title | | Supervisor | | | |
| Reason for Leaving | | | | | |
| 2 | Employer | | Dates Employed | | Work Performed |
| | | | From | To | |
| | Address | | | | |
| | Telephone Number(s) | | Hourly Rate / Salary | | |
| | | | Starting | Final | |
| Job Title | | Supervisor | | | |
| Reason for Leaving | | | | | |
| 3 | Employer | | Dates Employed | | Work Performed |
| | | | From | To | |
| | Address | | | | |
| | Telephone Number(s) | | Hourly Rate / Salary | | |
| | | | Starting | Final | |
| Job Title | | Supervisor | | | |
| Reason for Leaving | | | | | |
| 4 | Employer | | Dates Employed | | Work Performed |
| | | | From | To | |
| | Address | | | | |
| | Telephone Number(s) | | Hourly Rate / Salary | | |
| | | | Starting | Final | |
| Job Title | | Supervisor | | | |
| Reason for Leaving | | | | | |

If you need additional space, please continue on a separate sheet of paper.

| |
|---|
| <p>List professional, trade, business or civic activities and offices held. <i>You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.</i></p> <hr/> <hr/> <hr/> |
|---|

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Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills

Check Skills / Equipment Operated

____ CRT
____ PC
____ Calculator
____ Typewriter

____ Fax
____ Lotus 1-2-3
____ PBX System
____ WordPerfect

Production / Mobile
Machinery (list)

Other (list)

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

____ Yes ____ No

References

1. _____ () _____
Name Phone Number

Address

2. _____ () _____
Name Phone Number

Address

3. _____ () _____
Name Phone Number

Address

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Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applicants are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the Town of Eleanor.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Town of Eleanor.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Interviewer

Date

Employed Yes No Date of Employment _____

Job Title _____ Pay Rate _____ Department _____

By _____
Name and Title

Date

NOTES _____

