

# The Town of Snow Hill

**Please PRINT all information requested, sign all Releases and the Application.**

**Please complete the company application in full. Resumes may be attached but NOT as a substitute. Only applications that are complete, legible, and signed will be considered.**

**For Office Use Only**

**APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

## PERSONAL DATA

Date: \_\_\_\_\_ Position Applying For: \_\_\_\_\_ Wage Desired: \_\_\_\_\_

Employment Desired:  FULL-TIME  PART-TIME How soon are you available for Work? \_\_\_\_\_

Name \_\_\_\_\_  

Last
First
Middle
Maiden

Present address \_\_\_\_\_  

Number
Street
City
State
Zip

Home Phone ( ) \_\_\_\_\_ Cell or Msg Phone ( ) \_\_\_\_\_ E-mail address \_\_\_\_\_

Are you a United States Citizen: \_\_\_\_\_ If not, what type of Visa do you have? \_\_\_\_\_  
 Expiration Date \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

DO YOU HAVE A DRIVER'S LICENSE?  Yes  No Type (Circle): D-1 CDL-A CDL-B

Driver's License Number \_\_\_\_\_ State of issue \_\_\_\_\_ Expiration date \_\_\_\_\_

Have you ever had a conviction for DWI in any State? \_\_\_\_\_ Have you ever had your license suspended? \_\_\_\_\_

Have you had any accidents during the past three years?  No  Yes How many? \_\_\_\_\_

Have you had any moving violations during the past three years?  No  Yes How Many? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME?  No  Yes

If yes, explain conviction(s), nature of offense(s) State(s) where offenses occurred, and Sentence(s) imposed by the Court.

## MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES?  Yes  No

ARE YOU PRESENTLY ON ACTIVE DUTY OR A MEMBER OF THE NATIONAL GUARD?  Yes  No

Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_ Type Discharge \_\_\_\_\_ Specialty \_\_\_\_\_

## EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

PLEASE PRINT ALL  
INFORMATION REQUESTED  
EXCEPT SIGNATURE

APPLICATION FOR EMPLOYMENT

OFFICE SKILLS

Typing  Yes  No WPM \_\_\_\_\_ 10-Key Calculator  Yes  No Personal Computer  Yes  No  
Are you familiar with Microsoft Office  Yes  No Rate Your Computer Skills: Good Fair Learning

Please list Computer Software and Hospitality Industry Computer Systems with which you are familiar:

\_\_\_\_\_

\_\_\_\_\_

EQUIPMENT & MAINTENANCE EXPERIENCE

Heavy Equipment You Operate: \_\_\_\_\_ Years Experience: \_\_\_\_\_

Heavy Equipment You Repair: \_\_\_\_\_ Years Experience: \_\_\_\_\_

Maintenance Experience: Circle: Carpentry Electrical Plumbing Years Experience: \_\_\_\_\_

Tell Us About Yourself and Your Qualifications

An application form sometimes makes it difficult for an individual to adequately summarize their experience. Use the space below to summarize additional information describing your experience and full qualifications for the position for which you are applying. You may also include any explanations you feel would be helpful in understanding other issues in your application.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list two character references other than relatives or previous employers.

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Relationship to You: \_\_\_\_\_ Relationship to You: \_\_\_\_\_

Years they have known you: \_\_\_\_\_ Years they have known you: \_\_\_\_\_

What character traits will they confirm about you. (Circle) What character traits will they confirm about you. (Circle)

Trustworthy Responsible Dependable Loyal Leader Faithful Trustworthy Responsible Dependable Loyal Leader Faithful

**PLEASE PRINT ALL  
INFORMATION REQUESTED  
EXCEPT SIGNATURE**

**APPLICATION FOR EMPLOYMENT**

**Work Experience** Please list your work experience for the **past five years** beginning with your most recent job held.  
If you were self-employed, give firm name. (Attach a separate piece of paper if needed.)

<b>Name of Employer / Company</b>	<b>Supervisor Name</b>	<b>Employment Dates</b>	<b>Pay or Salary</b>
_____	_____	From ___/___/___	Start _____
Address City, State, Zip Code	_____	To ___/___/___	Final _____
_____	_____		
Phone number: _____	_____		
Your Job Title: _____	Reason for Leaving: _____		

List the duties you performed, skills you used or learned, support or supervisory positions held and promotions.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Name of Employer / Company</b>	<b>Supervisor Name</b>	<b>Employment Dates</b>	<b>Pay or Salary</b>
_____	_____	From ___/___/___	Start _____
Address City, State, Zip Code	_____	To ___/___/___	Final _____
_____	_____		
Phone number: _____	_____		
Your Job Title: _____	Reason for Leaving: _____		

List the duties you performed, skills you used or learned, support or supervisory positions held and promotions.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Name of Employer / Company</b>	<b>Supervisor Name</b>	<b>Employment Dates</b>	<b>Pay or Salary</b>
_____	_____	From ___/___/___	Start _____
Address City, State, Zip Code	_____	To ___/___/___	Final _____
_____	_____		
Phone number: _____	_____		
Your Job Title: _____	Reason for Leaving: _____		

List the duties you performed, skills you used or learned, support or supervisory positions held and promotions.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

**PLEASE READ CAREFULLY**

---

**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application with The Town of Snow Hill, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of The Town of Snow Hill, or otherwise to change in any respect the "employment-at-will" relationship between The Town of Snow Hill and the undersigned. Both the undersigned and The Town of Snow Hill may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in staff and/or benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others. I further authorize the company to complete a criminal background check and obtain a copy of my driving record. I hereby release the Company from any liability as a result of such contacts, inquiries, or records in order to ascertain my qualifications and fitness for employment.

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, national origin, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

Signature of applicant \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_