TOWN OF LAFAYETTE Employment Application

Thank you for applying for employment with our organization. A clear understanding of your background, as well as your interests, ambitions and abilities, will aid us in evaluation your qualifications. Please answer the following questions.

Employment History

Employer (1)

Work Phone

Address

We are an Equal Opportunity Employer and is committed to excellence through diversity. Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information						
Name						
Address			City	State	Zip	
Phone Number	Mobile Number		Email Address	Driver's License		
Are You a U.S. Citizen? Yes □ No □			Have You Ever Been Convicted of a Felony? If yes, explain. Yes □ No □			
If Selected for Employme Yes ☐ No [ou Willing to Submi	it to a Pre-Employment Dru	ug Screening Test?		
Position						
Position You Are Applying For			Available Start Date		Desired Pay	
Employment Desired			☐ Part Time	☐ Seasonal/Temporary		
Education						
School Name		Location	Years Attended	Degree Received	Major	
High						
College						
Other						
References						
Name			Title	Company	Phone	

Job Title

City

Starting Pay Rate

Zip

State

Dates Employed

Ending Pay Rate

Employer (2)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip

List your skills and qualifications acquired from employment or other experiences.

Tell us any additional information you would like us to consider.

Signature Disclaimer

I certify that all information contained in this application is true and correct. I understand and agree that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation form the employer's service if I have been employed. I understand that just as I am free to resign at any time, the Town of Lafayette reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Town of Lafayette has the authority to make any assurances to the contrary.

I give the Town of Lafayette the right to investigate all references and to secure additional information about me if job related. I hereby release from liability the Town of Lafayette and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Town of Lafayette is an equal opportunity employer. No question on the application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state or federal law.

Name (Please Print)	Signature
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Date	