CONFIDENTIAL

APPLICATION FOR EMPLOYMENT

Submit original application only; replications will not be accepted except for "Employment Experience" (page four).

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The Town of Warren considers qualified applicants for all positions without regard to race, color, religion, creed, national origin, age, gender, marital status, sexual orientation, veteran status or any other legally protected status or disabilities that do not interfere with job performance.

This application form will be used to evaluate whether you qualify for the specific position for which you are now applying. Please read the descriptions of position, duties and qualifications carefully before filling out this form. Complete the entire application and attach a personal resume (if available).

(PLEASE PRINT)

Position applied for: _____   Date: _____

Have you ever filed an application with the Town before?   ____Yes ____No   Date: _____

Have you ever been employed by the Town before?   ____Yes ____No   Date:_____

Name: _____
         Last   First   Middle Initial

Address: _____
              Number   Street   City   State   Zip Code

Number of years at this address: ____   Telephone: (___)_____ Daytime: (___) _____

1. Are you 21 years of age or older?   ____Yes ____No
2. Do you have a valid driver's license?   ____Yes ____No
3. Are you legally eligible to work in this country?   ____Yes ____No
4. Are you currently employed?   ____Yes ____No
5. May we contact your present employer?   ____Yes ____No
6. Are you on temporary layoff or recall status?   ____Yes ____No
7. Are you available to work: __Full-Time   __Part-Time   __Other?   Date:_____
8. Are you able to perform the "essential functions" of the position you are applying for,
   with or without reasonable accommodation? *(Do not provide details.)*   ____Yes ____No

EDUCATION:

	Name and Address of School	Course of Study	Years Completed	Diploma Degree

High School: _____

College: _____

Trade/Other: _____

2. Name of last school or college you attended: _____

Year Last Attended: _____

3. List any foreign languages you can speak, read and/or write: _____

4. Check for which trades you have received formal education:

__Carpentry _Electrical __Plumbing __Heating __ Other _____

Trade Certificate/License/Registration No. _____ State _____

Describe any other specialized training or education you have received through past employment or experience. _____

SPECIALIZED SKILLS   (List skill/equipment operated)

Office/Clerical: Fire/Police: Public Works:
__Telephone   _____   _____
__Fax Machine   _____   _____
__Calculator   _____   _____
__Typewriter/wpm___   _____   _____
__Dictation/wpm___   _____   _____
__Payroll Data Input   _____   _____
_____   _____   _____

COMPUTER EXPERIENCE   __Data Input   __Word Processing   __Excel   __Word
List other software programs you are familiar with: _____
_____

OTHER QUALIFICATIONS
Summarize any special job related skills and qualifications or any additional information that you feel may be helpful to us in considering your application.
_____
_____
_____

REFERENCES
List names, titles/positions and telephone numbers of three business/work references who are not related to you. If not applicable, list personal references who are not related to you.

1. _____   _____   (___)_____
   Name   Title   Phone #
2. _____   _____   (___)_____
   Name   Title   Phone #
3. _____   _____   (___)_____
   Name   Title   Phone #

EMPLOYMENT EXPERIENCE:

Start with your present or most recent job.

_____
Employer   From   To

_____
Address

_____
Telephone Number(s)   Work performed

_____
Job Title   Supervisor

_____
Reason for Leaving

_____
Employer   From   To

_____
Address

_____
Telephone Number(s)   Work performed

_____
Job Title   Supervisor

_____
Reason for Leaving

_____
Employer   From   To

_____
Address

_____
Telephone Number(s)   Work performed

_____
Job Title   Supervisor

_____
Reason for Leaving

_____
Employer   From   To

_____
Address

_____
Telephone Number(s)   Work performed

_____
Job Title   Supervisor

_____
Reason for Leaving

APPLICANT STATEMENT

I certify that the information I have provided herein is true, complete and correct to the best of my knowledge. I understand that if information provided by me is found to be false, incomplete or misrepresented, this may be cause for elimination from further consideration, or for discharge. I understand that all statements contained on this form are confidential. I authorize the investigation and verification of all facts as may be necessary for the purpose of arriving at an employment decision. I hereby waive any rights or claims I may have regarding the Town of Warren, its employees or agents for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process, and all other persons, corporations or organizations for such information about me. I understand and acknowledge that this application is not an employment agreement and does not define or establish the terms for such an agreement.

_____   _____
Signature of Applicant   Date

This application for employment shall be considered active for a period of time not to exceed sixty (60) days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.