



Town of Rindge
30 Payson Hill Road
Rindge, NH 03461

APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For			Date of Application		
How Did You Learn About Us? ____ Advertisement ____ Friend ____ Inquiry ____ Employment Agency ____ Relative ____ Other _____					
Last Name		First Name		Middle Name	
Address		Number	Street	City	State Zip Code
Telephone Number(s) (preferred #) (h) _____ (c) _____			Social Security Number (voluntary)		

Best time to be contacted _____ am or _____ pm

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

Have you ever filed an application with the Town of Rindge before? If Yes, date _____

Have you ever been employed with us before? If Yes, date _____

Do any of your friends or relatives, work for the Town of Rindge? _____ If
Yes, state name, relationship and location _____

Are you currently employed? _____

May we contact your present employer? _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
Proof of citizenship or immigration status will be required upon employment _____

Have you ever been convicted of a felony? _____

Date available for work _____ What is your desired salary range? _____

Are you available to work: _____ Full Time (Please indicate 1 2 3 shift)
_____ Part Time (Please indicate Mornings Afternoon Evenings)
_____ Temporary (Please indicate dates available _____ to _____)

Are you currently on "lay-off" status and subject to recall? _____ Can
you travel if a job requires it? _____

EDUCATION

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

ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application, including any job related experience.

Note To Applicants: Do Not Answer This Question Unless You Have Been Informed About The Requirements Of The Job For Which You Are Applying.

Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation? _____ YES _____ NO

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
_____ Starting Salary:\$ _____ Ending Salary:\$ _____

_____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO
☐ ☐

_____ Phone: _____
_____ Supervisor: _____
_____ Starting Salary:\$ _____ Ending Salary:\$ _____

_____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO
☐ ☐

_____ Phone: _____
_____ Supervisor: _____
_____ Starting Salary:\$ _____ Ending Salary:\$ _____

_____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO
☐ ☐

Job Title:

Responsibilities:

From:

Company:

Address:

Job Title:

Responsibilities:

From:

Company:

Address:

Job Title:

Responsibilities:

From:

Please list three professional references.

Full Name:

Company:

Address:

Relationship:

Phone:

Full Name:

Company:

Address:

Relationship:

Phone:

Full Name:

Company:

Address:

Relationship:

Phone:

APPLICANTS STATEMENT

I certify that answers given herein are true and complete.

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 applications 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 Employee 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 this organization.

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 Employer.

Signature of Applicant

Date