



Town of North Redington Beach Employment Application Form

PLEASE LEGIBLY PRINT ALL INFORMATION
REQUESTED EXCEPT SIGNATURE

Name: _____
Last First Middle Maiden

Home Address: _____
Number Street City State Zip

Telephone #: _____ How long have lived at this address: _____

Position Applying for: _____ Salary Desired: _____

Days/Hours Available for Work: _____

How many hours can you work weekly? _____ Can you work nights? _____

Employment Desired: _____ Full Time Only _____ Part Time Only _____ Full or Part Time

When can you start working? _____

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

Have you ever been convicted of a crime? _____ No _____ Yes

If Yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed and type(s) of rehabilitation. _____

Have you ever been in the Armed Forces? ☐ Yes ☐ No

Are you now a member of the National Guard? ☐ Yes ☐ No

Specialty _____ Date Entered _____ Discharge Date _____

Do you have a driver's license? ☐ Yes ☐ No

What is your means of transportation to work? _____

Driver's License Number: _____ State of Issue _____

Type of License: ☐ Operator ☐ Commercial (CDL) ☐ Chauffer Expiration: _____

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 _____

Office Skills (if applicable)			
Typing	<input type="checkbox"/> Yes _____ wpm <input type="checkbox"/> No		Other Office Skills:
Personal Computer	<input type="checkbox"/> Yes ____ PC ____ Mac <input type="checkbox"/> No		
10-Key	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Word Processing	<input type="checkbox"/> Yes <input type="checkbox"/> No		

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 additional sheets if necessary.

Name of Employer: Address: City/State/Zip: Phone Number:	Name of Last Supervisor	Employment Dates	Pay or Salary
		From To	Start Final
Reason for Leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

Name of Employer: Address: City/State/Zip: Phone Number:	Name of Last Supervisor	Employment Dates	Pay or Salary
		From To	Start Final
Reason for Leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

Name of Employer: Address: City/State/Zip: Phone Number:	Name of Last Supervisor	Employment Dates	Pay or Salary
		From To	Start Final
Reason for Leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

Name of Employer: Address: City/State/Zip: Phone Number:	Name of Last Supervisor	Employment Dates	Pay or Salary
		From To	Start Final
Reason for Leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			

May we contact your present employer? ___ Yes ___ No

Please list two references other than relatives or previous employers.

Name _____

Name _____

Position _____

Position _____

Company _____

Company _____

Address _____

Address _____

Telephone _____

Telephone _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Did you complete this application yourself? ☐ Yes ☐ No

If not, who did and why? _____

Applicant's Signature: _____

Date: _____