



TOWN OF OLD SAYBROOK
EMPLOYMENT APPLICATION

EXTERNAL

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion or natural origin.

PERSONAL INFORMATION

Date _____ Social Security Number _____

Name _____
Last First Middle

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Phone _____ Are you 18 years or older? yes no

If related to anyone in our employ,
state name and department _____

Referred by: _____

EMPLOYMENT DESIRED

Position _____ When can you Start? _____ Salary Desired _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

Ever applied to the Town of Old Saybrook? _____ When _____

EDUCATION		Number of Years Attended	Did You Graduate?	Subjects Studied
	Name and Location of School			
Grammar School				
High School				
College				
Trade, Business or Correspondence School				
Subjects of Special Study or Research Work:				
Activities other than Religious (civic, athletic, etc.)				
Volunteer Work - List Any Verified Work Performed on a Volunteer Basis:				

DATE MONTH YEAR	NAME, ADDRESS, AND PHONE OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
From				
To				
From				
To				
From				
To				

REFERENCES

List below the Names of Three Persons Not Related To You, Whom You Have Known At Least One Year

Name	Address/Phone	Business	Years Known
1.			
2.			
3.			

PHYSICAL RECORD Do you have any physical condition which may limit your ability to perform the job for which you are being considered?
 Yes ___ No ___ If yes, explain: _____

In Case of Emergency Notify _____
 Name Address Phone No.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

Name _____ Signature _____
 (print)

DO NOT WRITE BELOW THIS LINE

Interviewed By: _____ Date _____
 Hired: Yes ___ No ___ Position: _____ Department _____
 Date Reporting to Work: _____ Salary/Wage: _____