

Town of Carlisle

EMPLOYMENT APPLICATION

Application information

Full name:					Date:
	Last	First		М.І.	
Address:					Phone:
	Street addres	S		Apt/Unit #	
					Email:
	City		State	Zip Code	
Date Available:	S.S.	าด:			Desired salary: \$
Position applied	for:				
Are you a citizen	of the United States?	Yes 🗆	No 🗆		
If no, are you au	thorized to work in the U.S.?	Yes 🗆	No 🗆		
	arked for this company?	V 🗆		If yoo when?	
nave you ever w	orked for this company?	Yes 🗆	No 🗆	If yes, when?	
Have you ever be	een convicted of a felony?	Yes 🗆	No 🗆	If yes, explain?	

Education

High school:		Address:				
From:	То:	Did you graduate?	Yes 🗆	No 🗆	Diploma:	
College:		Address:				
From:	То:	Did you graduate?	Yes 🗆	No 🗆	Degree:	
Other:		Address:				
From:	То:	Did you graduate?	Yes 🗆	No 🗆	Degree:	

References

Please list three professional references.

Full name:	 Relationship:	
Company:	 Phone:	
Address:	 Email:	
Full name:	 Relationship:	
Company:	 Phone:	
Address:	 Email:	
Full name:	 Relationship:	
Company:	 Phone:	
Address:	Email:	

Previous Employment

Company:	Phone:		
Address:	Supervisor:		
Job title:	From:		То:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes 🗆	No 🗆	
Company:	Phone:		
Address:	Supervisor:		
Job title:	From:		То:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes 🗆	No 🗆	

Company:	Phone:
Address:	Supervisor:
Job title:	From: To:
Responsibilities:	
May we contact your previous supervisor for a reference?	Yes 🗆 No 🗆

Military Service

Branch:	From:	То:
Rank at discharge:	Type of discharge:	
If other than honorable, explain:		

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I agree to full and complete background investigation including polygraph examination.

I agree to pre-employment drug screen.

Signature:

Date: