

TOWN OF DENTON APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE)
(AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

DATE _____

NAME _____

LAST

FIRST

MIDDLE

SSN - Optional

PRESENT ADDRESS _____

STREET

CITY

STATE

ZIP CODE

PHONE NUMBER _____ ARE YOU 18 YEARS OR OLDER? YES NO

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED
IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES NO

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU EMPLOYED NOW? _____ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____

EVER APPLIED TO THIS COMPANY BEFORE? _____ WHERE? _____ WHEN? _____

REFERRED BY _____

| EDUCATION | NAME AND LOCATION OF SCHOOL | NO. OF YEARS ATTENDED | DID YOU GRADUATE? | SUBJECTS STUDIED |
|--|-----------------------------|-----------------------|-------------------|------------------|
| GRAMMAR SCHOOL | | | | |
| HIGH SCHOOL | | | | |
| COLLEGE | | | | |
| TRADE, BUSINESS OR CORRESPONDENCE SCHOOL | | | | |

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK _____

SPECIAL SKILLS _____

ACTIVITIES: (CIVIC, ATHLETIC, ETC.) _____

Exclude organizations, the name of which indicates the race, creed, sex, age, marital status, color, or nation of origin of its members.

U.S. MILITARY OR NAVAL SERVICE _____ RANK _____ PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES _____

BACKGROUND

BY APPLYING FOR AN EMPLOYMENT POSITION WITH THE TOWN OF DENTON, APPLICANT HEREBY CONSENTS AND AUTHORIZES THE TOWN TO UNDERTAKE A CRIMINAL BACKGROUND CHECK BY THE DENTON POLICE DEPARTMENT, AND AUTHORIZES THE RELEASE OF THAT INFORMATION TO THE HIRING DEPARTMENT SUPERVISOR.

Signature of Applicant

EMPLOYMENT REFERENCES (List Last Four Employers, Starting with Last One First)

| DATE MONTH AND YEAR | NAME AND ADDRESS OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|---------------------|------------------------------|--------|----------|--------------------|
| FROM TO | | | | |
| FROM TO | | | | |
| FROM TO | | | | |
| FROM TO | | | | |

WHICH OF THESE JOBS DID YOU LIKE BEST? _____

WHAT DID YOU LIKE MOST ABOUT THIS JOB? _____

REFERENCES: Give the names of three persons not related to you whom you have known at least one year.

| NAME | ADDRESS | BUSINESS | YEARS ACQUAINTED |
|------|---------|----------|------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |

THE FOLLOWING STATEMENT APPLIES IN: MARYLAND. IT IS UNLAWFUL IN THE STATE OF MARYLAND TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

Signature of Applicant

IN CASE OF
EMERGENCY NOTIFY

NAME ADDRESS PHONE NUMBER

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE TOWN OF DENTON'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE TOWN'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE. AT ANY TIME BY THE TOWN OF DENTON, I UNDERSTAND THAT NO TOWN REPRESENTATIVE, OTHER THAN IT'S TOWN ADMINISTRATOR, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE TOWN ADMINISTRATOR, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

DATE SIGNATURE

| OFFICE USE ONLY | | | | |
|--------------------|-----|------------------------|----------|--------------------|
| INTERVIEWED BY | | DATE | | |
| REMARKS | | | | |
| NEATNESS | | ABILITY | | |
| HIRED | YES | NO | POSITION | DEPT |
| SALARY/WAGE | | DATE REPORTING TO WORK | | |
| APPROVED:1 | 2 | 3 | | |
| Employment Manager | | Department Head | | Town Administrator |