

Town of Plaistow, New Hampshire

145 Main Street, Plaistow, NH 03865

Employment Application

Position Sought	
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1. These forms must be printed or typewritten.
2. All questions must be answered, if applicable. If not applicable, indicate "n/ a".
3. Failure to answer any and all (non-optional) questions truthfully, accurately or completely may result in the applicant's disqualification, or, if discovered after an individual is hired, termination from employment.
4. If the space provided is not sufficient for complete answers, or you wish to make additional comments, attach sheets the same size as these forms and indicate to which question those sheets pertain.
5. You are applying for a responsible position. It is essential that you follow instructions specifically as directed. Make sure all dates and information are absolutely accurate.
6. If, after submitting this application, you are no longer interested in appointment, please notify the Fire Chief in writing.
7. Applicants may include in their report of experience any verified work performed on a volunteer basis.
8. If you are offered a position that requires driving, a copy of your driving record would be included in the background investigation performed as part of a conditional employment offer.

I have read and understand the above instructions.

_____/_____/_____
Signature of Candidate Date

This application for unsuccessful applicants will be held on file for a period of one year.

For Official Use Only	
Date Received	/ /
Time Received	

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To The Applicant: **READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS.**

It is the policy of the Town of Plaistow to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

The Federal Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, national origin, or disability, (As does the Americans with Disabilities Act). Federal Law also prohibits discrimination on the basis of age with respect to certain individuals. The Laws of New Hampshire also prohibit some or all of the above-stated discrimination as well as some additional types, such as discrimination based upon ancestry, sexual orientation and marital status.

I. APPLICANT INFORMATION

A	Last Name	First Name	Middle Name	
	Street Address			Apartment Number
	City/Town	State	Country	Zip
	Years at this address	Cell Phone Number	Home Phone Number	Email Address
B	Are you lawfully eligible for employment in the United States?			<input type="checkbox"/> Yes <input type="checkbox"/> No
C	Are you at least 18 years of age?			<input type="checkbox"/> Yes <input type="checkbox"/> No
D	What position are you applying for?			
E	Salary desired?			
F	What name are your employment records under?			
	Have you ever used another name?			<input type="checkbox"/> Yes <input type="checkbox"/> No
	Please list all names and explain why. _____ _____			
G	Do you have a relative employed by this municipality?			<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, please give name, relationship, department, and position. _____ _____			
H	Do you personally know any employees working for this municipality?			<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, please give name, department, and position (if known) _____ _____			
I	If your application is considered favorably, on what date can you start work?			/ /
J	Have you previously submitted an application for employment with this municipality?			<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, give the name of the department and when. _____ _____			
K	What experience do you have that qualifies you for the position you are applying for? _____ _____			
L	<i>Answer only if the position you are applying for requires a driver's license:</i>			
	Do you possess a valid driver's license from the State of New Hampshire?			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

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II. EDUCATION

List the name and address of the following schools you attended and dates of graduation.					
Education Type	School Name Address Phone Number	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No Year	Years Attended	Degree	Major
A	High School	_____ _____ _____	_____ Year		
	College	_____ _____ _____	_____ Year		
	Graduate	_____ _____ _____	_____ Year		
	Equivalency	_____ _____ _____	_____ Year		

B	List any special abilities, interests, sports, or hobbies along with degrees of proficiency:				

C	If applying for an office position, please list any office machines, special equipment, computer systems or computer software experience. Also include your degree of proficiency with each.				

D	Use this space to provide any additional information relating to your education, training, certifications, etc.				

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III. EMPLOYMENT HISTORY

A In reverse chronological order (starting with the most recent employer) list all employments. Applicants may also include verifiable work performed on a volunteer basis.

Dates		Employment Information	Rates of Pay		Direct Supervisor
From Month / Year	To Month / Year	Employer Name Address Phone Number	Start	Finish	Name Title Phone Number
		_____			_____
Your position and title:		Reason for leaving:			
		_____			_____
Your position and title:		Reason for leaving:			
		_____			_____
Your position and title:		Reason for leaving:			
		_____			_____
Your position and title:		Reason for leaving:			
		_____			_____
Your position and title:		Reason for leaving:			

B Have you ever been fired or forced to resign because of misconduct or unsatisfactory employment? Yes No

If yes, give details:

C Have you ever been convicted of a felony? Yes No

If yes, give details:

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IV. REFERENCES

List three references (not relatives, in-laws, former or present employers) who are responsible adults. All persons to whom you refer may be asked to appraise your character, ability, experience, personality, and other qualities.

	Name	Address	Phone Number
A			
	How does this person know you?		How long has this person known you?
	Name	Address	Phone Number
B			
	How does this person know you?		How long has this person known you?
	Name	Address	Phone Number
C			
	How does this person know you?		How long has this person known you?

V. MILITARY SERVICE

A	Have you ever served on active duty in the Armed Forces of the United States or the National Guard?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Branch of Military Service	Highest Rank Attained	Serial Number	Dates of Active Duty	
				From	To
	Type of Discharge		Date of Discharge	Member of Reserve <input type="checkbox"/> Yes <input type="checkbox"/> No Branch _____	
B	Was any type of disciplinary action taken against you in the Military Service?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
	If yes, explain in detail.				
C	Are you now or were you formerly in the National Guard?			<input type="checkbox"/> Never <input type="checkbox"/> Present <input type="checkbox"/> Former	
	If you were a member of the National Guard and attend drills, meetings, or camps, give the name of the unit and location.				
		From	To	Location	

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IT IS UNLAWFUL IN NEW HAMPSHIRE 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.

Applicant's Statement

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and employee in writing.

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 the rules and regulations of the employer.

If hired, employment is on an at-will basis, terminable at any time with or without notice or cause.

_____/_____/_____
Signature of Applicant Date

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW INDICATING THAT YOU UNDERSTAND AND AGREE TO THE TERMS AS STATED.

I understand that a fit for duty physical, which includes a drug screening, may be required after an employment offer has been made. I understand that this is not a contract of employment and the municipality, or I may sever the employment relationship at any time for any reason. Any oral or written statement to the contrary, including any which are made by a City/Town representative, are disavowed, and may not be relied upon by any prospective or existing employee.

I understand also that this position may require occasional evening and weekend hours for which I must be available. I further understand that any appointment tendered me will be contingent upon the results of a complete background investigation, including my driving record and I am aware that willfully withholding information or making false statements on this application will be the basis for rejection of my application or dismissal from employment with the Town of Plaistow. I agree to these conditions, and I hereby certify that all statements made by me on this application are true and complete to the best of my knowledge. I hereby give the Town of Plaistow, through its agents, employees and Police Department, authorization to contact any person reasonably related to the background investigation. I also authorize any person contacted to share written and oral information that is reasonably related to the public position for which I am applying.

Finally, I hereby release, discharge, and exonerate this municipality, its agents and representatives, and any person furnishing or receiving information, from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, or other information or investigations made by or on behalf of this municipality. This authority shall continue until revoked in writing by the undersigned.

_____/_____/_____
Signature of Applicant Date