## APPLICATION FOR EMPLOYMENT

## Town of Scottsville 401 Valley Street Scottsville, VA 2459 434-286-9267

The Town of Scottsville is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

PERSONAL:								
Name					Date			
Last	First	Middle						
Address								
Nu	mber & Street		City	State			Zip Code	
Position Sought				Ful	I Time	Part Time		
Date Available	alary Desired _			Phone Numb	er			
Social Security Numb	er		Are you ov	ver 18 years old?	Yes	No		
Are you legally eligible	e for employment in	the United Sta	ites?	Yes	No			
(If offered er	mployment, you will	be required to	provide do	cumentation to v	erify eligibility.)			
EDUCATION: Ple	ease indicate educat	tion or training	g which you	believe qualifies	you for the pos	ition you are s	seeking.	
High School: No. of Y	rs Completed (circle	eone) 1234	Diploma:	YesNo	<b>G.E.D.:</b> Y	es No		
School(s)			City/State					
College and/or Vocat	ional School: Numb	er of Years Co	mpleted (ci	ircle one) 1 2 3 4				
School(s)			City/State	9				
Major			Degrees Earned					
Other Training or Deg	grees:							
School(s)			City/State	9 <u> </u>				
Course			Degree or	Certificate Earne	ed			
PROFESSIONAL LICENSE	OR MEMBERSHIP:							
Type of License(s) He	ld		State of V	ïrginia License N	umber			
License Expiration Da	te		Other Pro	fessional Membe	erships			

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

SKILLS:	Check all that apply.						
Office:	Spreadsheet	Database	eW	ord Proces	sing		
	Other Software Skills	6					
Have vo	u ever been employed	l with the Toy	wn of Scott	sville?	Yes No		
-	ease state job title and						
n 30, pr			ipioyment				
Popp	ing the Pey						
	ing the Box	a blanket ou	estion abou	it criminal o	convictions That	practice	is unfair and is now illegal in
	nia. The Town encoura						
	grounds checks may b rements for safety and						
·	5	5	U				
EMPLOYN	MENT: List last employe	r first, includ	ling U.S. Mi	litary Servic	e.		
-	contact your present of						
-	er						
					>		
	f Frankrum onti						
		From					
	for Locuing					PI	No. of Hrs
	for Leaving						
	er				6		
	ne	_					
		From					
-							
							No. of Hrs
Reason	for Leaving						
Employ	er			Address	6		
Telepho	ne		Position				
Dates o	f Employment:	From	(Mo/Yr)	То	(Mo/Yr)		
Salary		Supervisor			Department		
Duties _					FT	PT _	No. of Hrs
Reason	for Leaving						

Employer				Addre	SS	
Telephone			Position _			
Dates of E	mployment:	From	_ (Mo/Yr)	То	_(Mo/Yr)	
Salary		Supervisor			Depart	ment
Duties						FT PT No. of Hrs
Reason for	r Leaving					
lf you wish	to describe additio	nal work expe	erience, att	ach the ab	ove informat	tion for each position on a separate piece of paper.
Explain an	y gaps in work histe	ory:				
-	ever been discharg		-			Yes No
References	s: Professior	nal				Personal
Name _					Name	
Address _					Address	
-						
Phone (	)				Phone	<u>( )</u>
_						
Address _					Address	
- Phone <u>(</u>	)				Phone	 ()

## APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize the Town of Scottsville to verify their accuracy and to obtain reference information on my work performance. I hereby release the Town of Scottsville from any/all liability of whatever kind and nature which, at any time, could result from obtaining and basing an employment decision on such information.

I understand that falsified statements of any kind or omissions of facts called for on this application may result in disqualification for consideration for employment or, if already employed, grounds for immediate dismissal.

I understand that should an employment offer be extended to me and accepted, I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant \_\_\_\_\_

Date:	