## **Application for Employment**The Village of Elberta is an equal opportunity employer.

## PLEASE PRINT

## APPLICANT INFORMATION

	Las	t Name			
City			ZIP		
		lhono –			
	EDUCATION				
	Years Attended		Graduated	Yes	No
	Years Attended		Graduated	Yes	No
WORK EXPERIEN	CE – LIST MOST R	ECENT JO	DB FIRST		
_ Employer Name					
Employer Address					
Employer Phone					
	Responsibilities _				
	Reason for Leaving	·			
_ Employer Name					
Employer Address					
Employer Phone					
	Responsibilities				
	Reason for Leaving	·			
	WORK EXPERIEN  _ Employer Name _ Employer Address Employer Phone  _ Employer Address Employer Name _ Employer Address Employer Address Employer Phone	City Phone Num Alternate P  EDUCATION Years Attended Years Attended WORK EXPERIENCE – LIST MOST R  Employer Name Employer Address Reason for Leaving Reason for Leaving Employer Phone Employer Address Reason for Leaving Employer Phone Responsibilities Responsibiliti	Phone Number Alternate Phone  EDUCATION  Years Attended	Phone Number Alternate Phone  EDUCATION  Years Attended Graduated  Years Attended Graduated  WORK EXPERIENCE – LIST MOST RECENT JOB FIRST  Employer Name Employer Address Employer Phone Responsibilities  Reason for Leaving  Employer Address Employer Name Responsibilities Responsibilities  Employer Name Responsibilities  Employer Phone Responsibilities	City ZIP

## **GENERAL INFORMATION**

When are you available to start work?
Are you willing to work weekends and holidays? YES NO
Are there any times during the week when you are not available to work? YES NO
If yes, explain
Do you have a valid Driver's License? YES NO
Do you have any special skills, training or experience which may be applicable to this job?
YES NO
If yes, explain:
DISCLAIMER AND SIGNATURE
I certify that the information provided herein is true and correct to the best of my knowledge. I understand that, if employed, falsified statements on this Application for Employment form will be considered grounds for termination.  I authorize the company to thoroughly investigate my work experience and any other matters related to my suitability for employment. I further authorize my former employers to disclose to the company and all information they may have concerning my previous employment. In addition, I hereby release the company, my former employers, and all other persons from any and all claims, demands, or liabilitie arising out of, or in any way related to, such disclosure.  I acknowledge that, if employed, both the company and I have the right to terminate the employment relationship at any time, with or without cause or advance notice. This employment at will relationship will remain in effect throughout my employment with the company and may not be modified by any ora or implied agreement.
Applicant's Signature: Date: