

**TOWN OF SUMNER
APPLICATION FOR EMPLOYMENT**

The Town of Sumner considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other protected status.

(PLEASE PRINT)

Position Applied for	Date of Application
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How Did You Learn About The Position?

___ Advertisement ___ Friend ___ Walk In ___ Relative ___ Other _____

Name	Phone #
Address	Social Security #
City/State	

Have you ever submitted an application with us before? ___ Yes ___ No

If Yes, give date _____

Have you ever been employed with us before? ___ Yes ___ No

If Yes, give date _____

Are you currently employed? ___ Yes ___ No

May we contact your present employer? ___ Yes ___ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

___ Yes ___ No

(Proof of citizenship or immigration status will be required upon employment.)

Are you currently on "lay-off" status and subject to recall? ___ Yes ___ No

Are you a licensed driver? ___ Yes ___ No If yes, licensed in what State? _____

DL# _____

License Class/Endorsements: _____

How many years experience of driving and/or plowing snow with a dump truck? _____

Do you have any experience of operating a dump truck with a wing? ___ Yes ___ No

Are you able to lift a minimum of 50 pounds? ___ Yes ___ No

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read and/or write

	Fluent	Good	Fair
Speak			
Read			
Write			

Describe any specialized training, apprenticeship, skills that are applicable to the job you are applying for.

Other certifications/skills required by position (job) description (list):

Employment Experience: Start with your present or last position. Include any position-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1. Employer	Dates Employed From To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary From To	
Position Title	Supervisor	
Reason for Leaving (If still employed, state reason for seeking other employment.)		
2. Employer	Dates Employed From To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary From To	
Position Title	Supervisor	
Reason for Leaving		
3. Employer	Dates Employed From To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary From To	
Position Title	Supervisor	
Reason for Leaving		
4. Employer	Dates Employed From To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary From To	
Position Title	Supervisor	
Reason for Leaving		

If you require additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

On a separate sheet of paper, state any additional information you feel may be helpful to us in considering your application and attach such to this application.

References:

1. _____
(Name) Phone # Email Address

(Address)

2. _____
(Name) Phone # Email Address

(Address)

3. _____
(Name) Phone # Email Address

(Address)

