

Town of Mount Jackson

5901 Main Street / PO Box 487 Mount Jackson, VA 22842 540-477-2121 FAX: 540-477-2351

Application for Employment

The Town of Mount Jackson provides equal employment opportunities to all employees and applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

Personal Information <i>Incomplete information could disqualify</i>	you from further consideration. Please complete all fields.
Name	Date
Address	
E-mail Address	
Home Phone #	Mobile Phone #
Are you eligible to work in the U.S?	Yes No
Are you at least 18 years or older? (If	no, you may be required to provide authorization to work.)
Yes No	
Have you ever been terminated from	employment or asked to resign by an employer?
Yes No	
If yes , please provide company name	es and details
Can you work any shift? Yes N	No If no, explain:
Can you work overtime, including we	ekends? Yes No
Are you able to perform the essential a reasonable accommodation? Y	l functions of the job for which you are applying, with or without \prime es $_{}$ No
Employment Desired	
Date you can start	Hourly rate/Salary desired
Position desired	
Are you currently employed?	If so, may we inquire of your present employer?
Referral Source How did you hear about us?Wall	.k InAdvertisementReferral Social MediaOther

Yes	No I	f yes, pl	ease explain		
Do you know	anyone v	who wor	ks for this company? If ye	es, who?	
Education					
		Name	and location of school	Degree Received	Subjects studied/Majo
High School					
College or Ur	niversity				
_	any prof		al Licenses/Certification	=	_
	nst seven (nd working	7) years (of employment history, incl ords in time. Incomplete info		ployment, starting with the lify you from further
From	То		Employer Name		Telephone
Job Title			Address		I
Immediate si	upervisor	& title	Summarize the nature of	of work performed ar	nd job responsibilities
Reason for le	aving:				
From	То		Employer		Telephone
Job Title		Address			
Immediate supervisor & title		Summarize the nature of work performed and job responsibilities			
Reason for le	aving:		1		

Have you ever worked for this company before?

From	То	Employer	Telephone	
Job Title		Address		
Immediate supervisor & title		Summarize the nature of work performed and job responsibilities		
Reason for lea	ving:			
From	То	Employer Name	Telephone	
Job Title	Title Address			
Immediate supervisor & title		Summarize the nature of work performed and job responsibilities		
Reason for lea	ving:			
References				

Name	Address, Phone, Email	Title/Company
1		
2		
3		

Signature Disclaimer

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 Mount Jackson to verify their accuracy and to obtain reference information on my work performance. I hereby release The Town of Mount Jackson 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 Company. 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 Company may terminate my employment at any time with or without notice or cause.

Name (please print)	Signature of Applicant
Date	