

Town of Rehobeth
EMPLOYMENT APPLICATION
Please complete the entire application.

1. Employer Information

Employer: Town of Rehobeth
Address: 221 Malvern Rd
City/State/ZIP: Rehobeth, Alabama 36301
Telephone: 3346715829

It is the policy of Town of Rehobeth 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.

2. Applicant Information

Applicant Full Name: _____

Home Address: _____

City/State/ZIP: _____

Number of years at this address: _____

Daytime phone: _____ Evening phone: _____

Mobile phone: _____

Social Security Number: _____

Driver's License (State/Number): _____

3. Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: _____

Relationship to you: _____

Address: _____

Daytime phone: _____ Evening phone: _____

4. **Job Position Applied For:** Clerical Position

5. **If applicable, are you available to work overtime?** _____

6. **If you are offered employment, when would you be available to begin work?** _____

7. **Are you able to submit proof that you are legally eligible for employment in the United States?** _____

8. **Applicant's Skills**

List any skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Skill	Years of Experience	Ability or Rating
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4

9. **Applicant Employment History**

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

10. Applicant's Education and Training

College/University Name and Address _____

Did you receive a degree? Yes No If yes, degree(s) received: _____

High School/GED Name and Address: _____

Did you receive a degree? _____

Other Training (graduate, technical, vocational): _____

Please indicate any current professional licenses or certifications that you hold: _____

Awards, Honors, Special Achievements: _____

11. References

List any two non-relatives who would be willing to provide a reference for you.

Name: _____

Address: _____

City/State/ZIP: _____

Telephone: _____

Relationship: _____

Name: _____

Address: _____

City/State/ZIP: _____

Telephone: _____

Relationship: _____

12. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Town of Rehobeth to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

I understand that holding this position will require a satisfactory background check to include a drug screening.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND
AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE

DATE