

EMPLOYMENT APPLICATION

Village of Fairmont
PO Box 156, 635 6th Ave.
Fairmont, NE 68354
(402) 268-3341

GENERAL INFORMATION

Last Name First Name Middle Name

Address

City/State/Zip Code Phone Number

Position Applied For Salary Desired E-mail Address

Date Available Hours Available
_____ Full-time _____ Part-time _____ Temporary

Are you able to perform the essential job functions of the position you are applying with or without reasonable accommodations: _____ Yes _____ No

If hired will you be able to work overtime? _____ Yes _____ No

EDUCATION INFORMATION

SCHOOL	ADDRESS	MAJOR STUDIES	DEGREE/DIPLOMA/LICENSE/CERTIFICATE
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High School

Vocation/Business/Other

College/University

College/University

Graduate

Other Special Knowledge, Skills or Qualifications (list any construction or manufacturing equipment, office skills, technical equipment or training)

MILITARY SERVICE RECORD

Were you in U. S. Armed Forces: Yes No If yes, what branch? _____

Dates of Duty: From ____/____/____ To ____/____/____ Rank at Discharge _____

List duties in the service including special training: _____

EMPLOYMENT HISTORY

List all employers, starting with the most recent position. All information must be completed. You may attach a resume, but not in place of completing the required information.

Most recent employer

Is this your current employer: Yes No May we contact this employer for references? Yes No

Employed From	Employed To	Job Title	Starting Salary	Ending Salary
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Employer Name	Employer Address	Supervisor's Name	Supervisor's Phone #
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Job Duties and Responsibilities _____

Reason for Leaving _____

Next Most Recent Employer:

Employed From	Employed To	Job Title	Starting Salary	Ending Salary
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Employer Name	Employer Address	Supervisor's Name	Supervisor's Phone #
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Job Duties and Responsibilities _____

Reason for Leaving _____

Next Most Recent Employer:

Employed From	Employed To	Job Title	Starting Salary	Ending Salary
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Employer Name	Employer Address	Supervisor's Name	Supervisor's Phone #
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Job Duties and Responsibilities _____

Reason for Leaving _____

If your application is considered favorably, on what date will you be available for work: _____

Person to be notified in case of accident or emergency:

Name Relationship

Address City State Zip Code

PERSONAL REFERENCES

Name: _____

Occupation: _____

Address: _____

Phone Number: _____

Name: _____

Occupation: _____

Address: _____

Phone Number: _____

Name: _____

Occupation: _____

Address: _____

Phone Number: _____

The above information is true and correct. I authorize the Village of Fairmont to inquire into my education, past employment history and references as needed to research my qualifications for the position. If employed, I will provide original documents which verify my identity and right to work in the United States. I hereby acknowledge that I have read and agree to the above statements.

Signature

Date