



TOWN OF GREENVILLE EMPLOYMENT APPLICATION

It is the policy of the Town of Greenville to consider all applications without regard to race, religion, color, sex, age, marital status, national origin, disability, Vietnam era or other veteran status.

Please complete all items and print in ink.

Position Applied for: _____ Date: _____

Date available: _____ Days/Hours preferred: _____ Salary Requirements: _____

Job status applying for: ☐ Full-time ☐ Part-time ☐ Seasonal

PERSONAL DATA:

Name: _____
Last First MI Cell Number

Address: _____
Home Number

City, State, Zip _____
Email

Are you 18 years of age or over? ☐ yes ☐ no

Are you 21 years of age or over (Police and Fire Depts.)? ☐ yes ☐ no

Do you possess a valid motor vehicle operator's license? ☐ yes ☐ no

Are you eligible for employment in the United States? ☐ yes ☐ no

Has any time restriction been placed on your eligibility for employment for the United States?

☐ yes ☐ no If yes, what restrictions: _____

**** Please not, if hired you are required by law to submit proof of identity and eligibility to work in the U.S. ****

Have you ever been employed by the Town of Greenville? ☐ yes ☐ no
If yes, give date(s) and position(s): _____

Do you have any friends/relatives employed at the Town of Greenville? ☐ yes ☐ no
If yes, give name(s)/relationship(s): _____

Are you capable of performing the essential functions of the job which you are applying with reasonable accommodation?
☐ yes ☐ no If no, please describe: _____

Have you ever been convicted of a felony? ☐ yes ☐ no If yes, please explain in detail: _____

**** Note: Disclosure of a criminal record will not necessarily disqualify you from employment, as the nature of the offense, date, and the position for which you are applying will also be considered. ****

PRE-EMPLOYMENT PHYSICAL/TESTING NOTICE

The Town of Greenville is committed to maintaining a drug-free workplace. Therefore, all candidates for employment (applicants to whom a contingent offer of employment has been made) are required to complete a medical examination, including testing of drug and alcohol use, by a physician of The Town of Greenville's choice. Employment is contingent upon a candidate's submission to a successful completion of the medical exam.

APPLICANT'S ACKNOWLEDGEMENT

I agree to undergo the pre-employment physical and drug/alcohol test. I understand that the results of such a test will be disclosed only to the Town of Greenville's Human Resources personnel and other's with a need to know, or as required by law. I understand that if I refuse to consent to testing, fail to provide a urine sample when requested, provide a false or tampered urine sample, or fail to successfully complete the physical or drug/alcohol test, I will not be hired in accordance with The Town of Greenville's policy.

Permission is granted to The Town of Greenville to conduct an investigation and to solicit information as to my educational and employment history, character, general reputation, and criminal conviction record. I release The Town of Greenville and all persons and organizations from any liability arising from such statements, their solicitation or use.

I understand that this employment application and any other company documents are not contracts of employment and that any individual who is hired may voluntarily leave or be terminated at any time, with or without cause. If terminated, I authorize The Town of Greenville to deduct, to the extent permitted by law, any amount which I may owe to The Town of Greenville and deduct from this amount which The Town of Greenville may owe me. I understand that no representative of The Town of Greenville has any authority to offer or to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.

I certify that all statements made by me on this application are true and correct to the best of my knowledge and belief. I understand that any false, inaccurate, or omitted statements of a material fact could be a cause for rejection of my application or termination of my employment at any time.

I have read, understand, and by my signature consent to these statements.

Signature of Applicant

Date

MILITARY SERVICE DATA

Have you ever served in the U.S. Armed Forces [] yes [] no If yes, please give dates of services:

From: _____ To: _____

List any special skills, abilities, certifications and/or licenses acquired: _____

EDUCATION DATA

Name & Address of Schools attended	Dates Attended From To	Did you graduate?	Type of Degree / Diploma received	Major/Minor Fields of Study
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High School

College/University

Graduate School

Other

List any honors or scholarships received: _____

List professional, trade, business or civic activities and offices held (you may exclude memberships which would reveal sex, race, religion, national origin, age, disability, or other protected status):

REFERENCES

List (with address & phone number) the names of (3) three persons familiar with your character, ability, or education for more than one year. Please do not include friends or relatives.

1. _____

2. _____

3. _____

EMPLOYMENT RECORD

Please list dates of all employment starting with your most recent position. Attach a separate sheet if necessary.

1. Company Name & Address: _____

Position/Title/Duties: _____

Supervisor's Name/Title/Phone Number: _____

Dates of Employment: From: _____ To: _____ Starting Salary: _____ Ending Salary: _____

Reason for Leaving: _____

2. Company Name & Address: _____

Position/Title/Duties: _____

Supervisor's Name/Title/Phone Number: _____

Dates of Employment: From: _____ To: _____ Starting Salary: _____ Ending Salary: _____

Reason for Leaving: _____

3. Company Name & Address: _____

Position/Title/Duties: _____

Supervisor's Name/Title/Phone Number: _____

Dates of Employment: From: _____ To: _____ Starting Salary: _____ Ending Salary: _____

Reason for Leaving: _____
