All applications must be submitted to: Town of Merrimack

Application for Employment

Human Resources Office 6 Baboosic Lake Road Merrimack, NH 03054 (603) 424-2331



Equal access to programs, services and employment is available to all persons. Those applicants requiring a reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. We are an equal opportunity employer.

Please Print			
Position applied for	Application Date		
Name	FIRST	- NC - CON - 1214 - 1/2 C - C - 1/2	MIDDLE
Address		CITY	STATE ZIP CODE
Home Phone Cellula	r/Other #		
Shift preferred	any	Expected pay	
Would you accept full-time work? Yes	Would you accept par	rt-time work? Yes	No
On what date would you be available for work? _	tonene administrations		nt a consent the poor to be distributed to the average.
If necessary, best time to call you is	□AM □PM □Home □Cellu	llar/Other	
How were you referred to our Company?			
Have you submitted an application here before?	☐Yes ☐No If yes, please giv	e date(s) and position(s)	į
Have you ever been employed here? ☐ Yes ☐]No If yes, please give dates:_		
Is this application a request for reemployment fol If yes, additional information may be requested.	lowing an extended military lea	ave of absence from our	Company? Yes No
If you are under 18 years old, can you provide a v	work permit if required?	s 🗆 No	
Are you legally eligible for employment in the Ur	nited States? (If yes, proof is req	uired if hired.)	□No
Are you able to perform the "essential functions" NOTE: This question is not designed to elicit information ab accommodation, or whether accommodation is necessary. The Yes No Need more information about	out an applicant's disability. Please do n nese issues may be addressed at a later s	ot provide information about tage, to the extent permitted by	the existence of a disability, particular
Will you travel if required? ☐ Yes ☐ No	Will you work overtime if rec	quired? Yes No	
If they have been explained to you, are you able to	o meet the attendance requirem	nents of the position?	Yes No N/A
Have you ever been bonded?			
Please provide your driver's license number, if dr	iving is required for this job		State
Have you entered into an agreement with any for restrict your ability to work for our Company?			
NOTE: Answering "yes" to the following question does not co violation, rehabilitation and position applied for will be taken Have you ever pleaded "guilty" or "no contest" to If yes, please provide date(s) and details:	into account.		fense, seriousness and nature of the

Employment Experience

Note: You must complete this section even if you have provided a separate resume.

Place an X by the employer(s) you DO NOT want us to contact. List your most recent employer first.

Employer	100 - 10 100 100 100 - 1		
Contact Name	E-mail		
Address	100-00-100-100-100-00-00-100-00-00-00-00	Phone ()
Job Title	Supervisor		
Dates employed: from (mm/yy)/ to (mm/yy)/	Hourly rate/salary: starting		final
Work performed			
Reason for leaving			
What did you like most about your position?			
What were the things you liked least about the position?			
Employer			
Contact Name	E-mail		
Address		Phone ()
Job Title	_ Supervisor		<u></u>
Dates employed: from (mm/yy)/ to (mm/yy)/	Hourly rate/salary: starting		final
Work performed			
Reason for leaving			
What did you like most about your position?			· · · · · · · · · · · · · · · · · · ·
What were the things you liked least about the position?			· · · · · · · · · · · · · · · · · · ·
Employer			
Contact Name	E-mail		
Address		Phone ()
Job Title	_ Supervisor		
Dates employed: from (mm/yy)to (mm/yy)	Hourly rate/salary: starting		final
Work performed			
Reason for leaving			
What did you like most about your position?			
What were the things you liked least about the position?			

Employment Experience (continued)		
Explain any gaps in your employment, other than those of	due to personal illness	, injury or disability.
Have you ever been fired or asked to resign from a job? If yes, please explain:		
	00 00	
Education Background		
High School:		_ Location
Course of study	_ Did you graduate?	☐ Yes ☐ No Degree or diploma
College:		Location
Course of study	_ Did you graduate?	☐ Yes ☐ No Degree or diploma
Graduate School:		Location
Course of study	_ Did you graduate?	☐ Yes ☐ No Degree or diploma
Vocational Training/Other:		Location
Course of study	_ Did you graduate?	☐ Yes ☐ No Degree or diploma
Continuing Education:		
Z200-00-00-00-00-00-00-00-00-00-00-00-00-		
<u> </u>		
Special Training or Skills		
Languages, machine operation, etc., that would be o	f benefit in the job for	which you are applying.
Social Security Number		
SS# The Co	ompany will make rea	sonable efforts to safeguard the privacy of this information
and will use it only for employment purposes.		

References

List names and telephone numbers of three business/work references who are **not** related to you and are **not** previous supervisors. If not applicable, list three school or personal references who are **not** related to you.

Name	Title	Relationship to You	Telephone	E-Mail	Years Known
*					

Applicant Statement

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

If hired, I agree to conform to the Company's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment either express or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Company's option.

I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the Company. I understand that no Company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives for seeking, gathering and using truthful and nondefamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I also understand that, if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States as required by federal immigration laws.

This Company does not tolerate unlawful discrimination or harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local law. No question on this application is used to limit or exclude an applicant from employment consideration on any basis prohibited by applicable federal, state or local law.

Applicant's signature	Date	
	Decrease and the	



Item #A0406

