

APPLICATION FOR EMPLOYMENT

The **Town of East Hampton** is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability or any other characteristic protected by law.

Introductory Information:

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email address: _____

Applicant Questions:

Type of worked desired: _____ Salary desired: _____ Date Available: _____

If hired, can you provide documents required to establish your eligibility to work in the U.S.? Yes___No___

Are you 16 years of age or older? Yes___No___

How were you referred to the Town of East Hampton? _____

Education:

High School or last grade completed:

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____

Degree/Diploma: _____

Military Experience:

Branch of Service: _____ From: _____ To: _____

Rank/Type of Service: _____

Special Training/Experience: _____

College or Technical School

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____

Degree/Diploma: _____

Other Schooling or Training

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____

Degree/Diploma: _____

Record of Employment: List positions starting with most recent:

1. Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____

Duties: _____

Reason for Leaving: _____

2. Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____

Duties: _____

Reason for Leaving: _____

3. Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____

Duties: _____

Reason for Leaving: _____

Work-Related References: (Do not include relatives)

Name	Occupation	Years Known	Contact Information
1. _____	_____	_____	_____
Email address: _____			
2. _____	_____	_____	_____
Email address: _____			
3. _____	_____	_____	_____
Email address: _____			

Are you related to anyone currently working for the Town of East Hampton? Yes ___No ___.

If so, whom? _____ Relationship? _____

Applicant Certification

I certify that the answers given in this application are true to the best of my knowledge. I understand that the use of this application form does not indicate that there are any positions open and does not in any way obligate the Town of East Hampton (hereafter "Town"). I understand that this application will be active for a period of 90 days after the date when I sign the application below. After that time, if I seek to be considered for employment, I must submit a new application.

In consideration of my employment, I agree to conform to the policies and procedures of the Town, as they may from time to time be implemented or revised. I further agree that unless my employment is otherwise governed by a collective bargaining agreement or individual written contract of employment, my employment and compensation are "at-will" and can be terminated with or without cause at any time for any lawful reason at the option of either the Town or myself. I understand that should I be granted an interview, no representations that may be made at the interview are to be construed as creating any obligation, promise or contract on behalf of the Town that in any way would limit the Town's right to terminate my employment at will. I understand that no supervisory, management or any other employee at the Town has any authority to make a commitment of guaranteed or continuing employment to me, and no document or publication of the Town or conduct of anyone at the Town should be interpreted to make such a guarantee, unless the Town Manager specifically agrees to such change in a signed document.

I understand that false or misleading information given in my application, resume, and/or interview or during the course of my employment may result in withdrawal of a job offer or discipline up to and including termination of employment, whenever the omission or falsehood is discovered. I understand that acceptance for employment shall depend on satisfactory replies from my references and other background checks. In the event I receive a job offer, I also understand that I may be subject to a drug and/or alcohol test and/or a medical examination and that my employment shall depend on successful completion of any such testing performed.

I understand that if I am paid a weekly salary rather than an hourly rate, my salary is intended to compensate me for all hours I work, including any hours in excess of 40 hours in a work week.

I have read, understood and agree to the foregoing.

Signature of Applicant

Date