

GENERAL

Subjects of special study or research work: _____

Job related skills (computer, driver's license, certifications): _____

EMPLOYMENT HISTORY List below your last four employers, starting with the last one first

Employer	Date Employed From: _____ To: _____
Address	Telephone Number
Job Title	Supervisor
State major responsibilities or duties	Reason for leaving
Employer	Date Employed From: _____ To: _____
Address	Telephone Number
Job Title	Supervisor
State major responsibilities or duties	Reason for leaving
Employer	Date Employed From: _____ To: _____
Address	Telephone Number
Job Title	Supervisor
State major responsibilities or duties	Reason for leaving
Employer	Date Employed From: _____ To: _____
Address	Telephone Number
Job Title	Supervisor
State major responsibilities or duties	Reason for leaving

REFERENCES List below three persons not related to you, whom you have known for at least one year

NAME	ADDRESS	PHONE NUMBER	POSITION	YEARS ACQUAINTED

If you are hired by the Town of Clarksburg, you will be required to attest to your identify and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Town of Clarksburg.

I understand that any employment is conditioned on a background check. I authorize the Town of Clarksburg to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Town of Clarksburg, without giving me prior notice of such disclosure. In addition, I release the Town of Clarksburg, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Town of Clarksburg. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Town of Clarksburg unless made in writing by an authorized Town of Clarksburg representative.

If I am offered employment I agree to submit to a medical examination and drug test, if required, before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Town of Clarksburg and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Town of Clarksburg the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, if required, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that acceptance of this form does not indicate there is a position open and does not obligate the Town of Clarksburg to hire. If hired, I agree to abide by all Town of Clarksburg work rules, policies and procedures. The Town of Clarksburg retains the right to revise its policies and procedures, in whole or in part, at any time.

Date: _____

Signature _____