



Have you ever been convicted of offenses which relate reasonable to fitness to perform the particular job being applied for? \_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, give details below. (Use additional sheets if necessary).

| Date of Offense | Place | Charges | Penalties |
|-----------------|-------|---------|-----------|
|                 |       |         |           |
|                 |       |         |           |
|                 |       |         |           |
|                 |       |         |           |

Conviction record will not automatically exclude you from employment. Factors such as age at the time of the offense, rehabilitation efforts, and seriousness of the offense will be taken into account. The relationship between the offense and the job for which you are applying will be evaluated carefully.

Are you prevented from lawfully becoming employed by the Town of Cassian because of visa or immigration status? (Proof of citizenship or immigration may be required upon employment.)

\_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have responsibilities that would prevent you from traveling, working unusual hours, or overtime if required by the job?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Are there any other experiences, skills or qualifications which you feel would especially qualify you for employment which you think would be of interest to us in considering your application. Exclude names of organizations which may indicate race, color, religion, sex, sexual orientation or national origin, marital or veteran status, or the presence of non-job related medical conditions or handicaps.

**REFERENCES:** List references other than relatives/former employers whom you have known for at least one year.

| Name | Address | Occupation | Years Acquainted |
|------|---------|------------|------------------|
|      |         |            |                  |
|      |         |            |                  |
|      |         |            |                  |

**EMPLOYMENT HISTORY:** Give details of work experience, including apprenticeships, summer work, and misc. jobs. List most recent employer first. **COMPLETE ALL SECTIONS.**

|  |                     |  |                     |
|--|---------------------|--|---------------------|
| Employer:                              | Dates of Employment |  | Duties Performed:   |
| Address:                               |                     |  | Job Title:          |
| Telephone Number:                      |                     |  |                     |
| Supervisor                             | Wage Rate/Salary    |  | Reason for Leaving: |
| May we contact for reference: Yes / NO |                     |  |                     |

|  |                     |  |                     |
|--|---------------------|--|---------------------|
| Employer:                              | Dates of Employment |  | Duties Performed:   |
| Address:                               |                     |  | Job Title:          |
| Telephone Number:                      |                     |  |                     |
| Supervisor                             | Wage Rate/Salary    |  | Reason for Leaving: |
| May we contact for reference: Yes / NO |                     |  |                     |

|  |                     |  |                     |
|--|---------------------|--|---------------------|
| Employer:                              | Dates of Employment |  | Duties Performed:   |
| Address:                               |                     |  | Job Title:          |
| Telephone Number:                      |                     |  |                     |
| Supervisor                             | Wage Rate/Salary    |  | Reason for Leaving: |
| May we contact for reference: Yes / NO |                     |  |                     |

|  |                     |  |                     |
|--|---------------------|--|---------------------|
| Employer:                              | Dates of Employment |  | Duties Performed:   |
| Address:                               |                     |  | Job Title:          |
| Telephone Number:                      |                     |  |                     |
| Supervisor                             | Wage Rate/Salary    |  | Reason for Leaving: |
| May we contact for reference: Yes / NO |                     |  |                     |

|  |                     |  |                     |
|--|---------------------|--|---------------------|
| Employer:                              | Dates of Employment |  | Duties Performed:   |
| Address:                               |                     |  | Job Title:          |
| Telephone Number:                      |                     |  |                     |
| Supervisor                             | Wage Rate/Salary    |  | Reason for Leaving: |
| May we contact for reference: Yes / NO |                     |  |                     |

List on a separate sheet any other employment not shown above.

**IMPORTANT: PLEASE READ CAREFULLY BEFORE SIGNING**

I certify that the answers given by me in this application are true and correct without omissions of any kind. I understand that any misleading or incorrect statements may render this application void. If I am employed and it is subsequently discovered that any answer given by me is incomplete, misleading or incorrect, I may be terminated. I agree that the Town of Cassian shall not be held liable in any respect if my employment is terminated because of false, incomplete or misleading statement, answers or omissions made by me in this application.

I also authorize pertinent companies: Schools, State, County or Federal agencies: Municipalities: or Persons to give the Town of Cassian any information requested regarding my employment, character, experience, credit record, and qualifications and/or suitability for employment with the Town of Cassian, including a check of my fingerprints and police records for the purpose of considering my suitability for hire. I hereby forever release, discharge and covenant not to sue any person or organization for any result of providing, obtaining or acting upon such information. I understand that such information is sought with confidentiality and will not be release to me in any form whatsoever.

In addition, a copy of this authorization is as valid as the original and should be recognized as such.

I further understand that I may be asked to undergo physical examination, including substance abuse screening prior to final appointment to a position in the Town of Cassian, refusal to participate will result in the rejection of my application.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Applicant

## Town of Cassian - Skills Checklist

We have developed this checklist so that you may describe your skills, abilities and special licenses or permits. Working together we can better assure that you are considered for only those positions which require your skills, abilities and special license or permit.

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At approximately what level can you operate a typewriter/keyboard?

Hunt & Peck     25wpm     40wpm     50wpm     60+wpm

Do you have experience meeting and dealing effectively with the public, handling complaints, providing information, answering questions, etc?  YES     NO If yes, please describe: \_\_\_\_\_

List all heavy equipment or other equipment related to the position you are applying for that you are skilled in operating:

\_\_\_\_\_ Do you possess a valid driver's license?  YES     NO

License # \_\_\_\_\_ State \_\_\_\_\_

Do you possess a valid Commercial Driver's License  YES     NO

License # \_\_\_\_\_ State \_\_\_\_\_

What level commercial license do you currently hold?

A     B     C     D     M

Check appropriate endorsement(s) received:

"T" Double/Triple Trailers     "N" Tank Vehicles

"H" Hazardous Materials     "P" Passengers

"X" Hazardous Materials & Tankers     "S" School Buses

Have you passed the CDL special knowledge and skills test regarding air brakes?  Yes     No

Please list any other special license, permit, or certifications you possess which may be applicable to the position you are applying for: