# TOWN OF DENTON APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMA	TION		DATE	
NAME				
LAST	FIRST	MIDDLE		
PRESENT ADDRESS				
	STREET	CITY	STATE	ZIP CODE
PHONE NUMBER		ARE YOU 18 YEA	RS OR OLDER?	YES NO
ARE YOU PREVENTED	FROM LAWFULLY BECOMING	EMPLOYED		
IN THIS COUNTRY BEC	CAUSE OF VISA OR IMMIGRATIO	ON STATUS?	YES	NO
EMPLOYMENT DESIR	RED	DATE YOU CAN START		SALARY DESIRED
	NOWO	IF SO, MAY WE II	•	
ARE YOU EMPLOYED	NUW ?	YOUR PRESENT	EMPLOYER?	
EVER APPLIED TO THI	S COMPANY BEFORE?	WHERE?		WHEN?
REFERRED BY				
EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED

GRAMMAR SCHOOL		
HIGH SCHOOL		
COLLEGE		
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL		

### **GENERAL**

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

SPECIAL SKILLS

ACTIVITIES: (CIVIC, ATHLETIC, ETC.)	
Exclude organizations, the name of which indicates t	he race, creed, sex, age, marital status, color, or nation of origin of its members.
U.S. MILITARY OR	PRESENT MEMBERSHIP IN

U.S. MILITARY OR		PRESENT MEMBERSHIP IN	
NAVAL SERVICE	RANK	NATIONAL GUARD OR RESERVES	

## BACKGROUND

BY APPLYING FOR AN EMPLOYMENT POSITION WITH THE TOWN OF DENTON, APPLICANT HEREBY CONSENTS AND AUTHORIZES THE TOWN TO UNDERTAKE A CRIMINAL BACKGROUND CHECK BY THE DENTON POLICE DEPARTMENT AND AUTHORIZES THE RELEASE OF THAT INFORMATION TO THE HIRING DEPARTMENT SUPERVISOR. ALL POSITIONS ARE SUBJECT TO ALCOHOL AND DRUG TESTING.

# EMPLOYMENT REFERENCES (List Last Four Employers, Starting with Last One First)

DATE MONTH AND	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
YEAR				
FROM TO				

#### WHICH OF THESE JOBS DID YOU LIKE BEST?

#### WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES: Give the names of three persons not related to you whom you have known at least one year.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1			
2			
3			

THE FOLLOWING STATEMENT APPLIES IN: MARYLAND. IT IS UNLAWFUL IN THE STATE OF MARYLAND TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

IN CASE OF				
EMERGENCY NOTIFY				
	NAME	ADDRESS	PHONE NUMBER	

Signature of Applicant

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE TOWN OF DENTON'S RULES AND REGULATIONS, 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 TOWN'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 TOWN OF DENTON, I UNDERSTAND THAT NO TOWN REPRESENTATIVE, OTHER THAN IT'S TOWN ADMINISTRATOR, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE TOWN ADMINISTRATOR, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

DATE	SIGNATURE

	OFFICE USE ONLY		
INTERVIEWED BY DATE			
REMARKS			
NEATNESS	ATNESS ABILITY		
HIRED YES NO	POSITION	DEPT	
SALARY/WAGE	DATE REPORTING TO WORK		
APPROVED:1	2	3	
Employment Manager	Department Head	Town Administrator	