



# Town of Randolph Employment Application

## Application Information

Full name: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
*Street address Apt/Unit #*  
\_\_\_\_\_  
*City State Zip Code*

Date Available: \_\_\_\_\_ SS #: \_\_\_\_\_ Driver's License#: \_\_\_\_\_

Position applied for: \_\_\_\_\_

Have you previously worked for the Town of Randolph? Yes  No  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? Yes  No  If yes, explain? \_\_\_\_\_

## Education

High school: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Degree: \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

May we contact your previous supervisor for a reference? Yes  No

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

May we contact your previous supervisor for a reference? Yes  No

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

May we contact your previous supervisor for a reference? Yes  No

## Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at discharge: \_\_\_\_\_ Type of discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**Additional licenses or certifications (CPR, CDL, Notary, etc.)**

Title:	_____	Date Expires:	_____
Title:	_____	Date Expires:	_____
Title:	_____	Date Expires:	_____

**Please describe any previous volunteer experience (including organization names and dates):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**References**

Please list three professional references.

Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____
Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____
Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____

**Disclaimer and signature**

I authorize the Town of Randolph to investigate any and all statements made in this application. I also authorize my current or previous employers to verify the statements made in this application and to provide other employment data relating to my job performance, as requested. I authorize the Town of Randolph to contact my references. Falsification or misrepresentation of the information submitted on this application could result in the disqualification of the applicant from further consideration for employment, or if the applicant has been hired, could result in his/her discharge from employment

Signature: \_\_\_\_\_ Date: \_\_\_\_\_