## APPLICATION FOR EMPLOYMENT

TO

## TOWN OF MINERAL SPRINGS EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION				DATE				
NAME (LAST NAME FIRST				SOCIAL SECURITY NO.				
PRESENT ADDRESS	CITY			STATE			ZIP CODE	
PERMANENT ADDRESS	CITY			STATE			ZIP CODE	
PHONE NO.			EMAIL					
EMPLOYMENT DESIRED		•						
POSITION		DATE	DATE YOU CAN START		SALA	SALARY DESIRED		
ARE YOU (CIR EMPLOYED? YES			IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLO			(CIRCLE ONE) 'ER? YES NO		
EDUCATION HISTORY								
	ATION OF SCHOOL		YEA ATTEN		O YOU DUATE?		SUBJECTS STUDIED	
HIGH SCHOOL								
COLLEGE								
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL								
GENERAL INFORMATION								
SUBJECTS OF SPECIAL STU WORK OR SPECIAL TRAIN								
U.S. MILITARY OR NAVAL SERVICE					RANK			
FORMER EMPLOYERS (L						ST)		
DATE N/ MONTH AND YEAR FROM	AME & ADDRESS OF EMPLO	OYER	SALARY	P	OSITION		REASON FOR LEAVING	
TO								
FROM								
TO FROM								
TO								
EDOM								

			ED TO YOU, WHOM YOU HAVE		
ľ	NAME	ADDRESS	BL	JSINESS	YEARS KNOWN
	acts contained in this a		nd complete to the best cation shall be grounds f		e and
give you any and a	II information concerning therwise, and release	ng my previous emplo	I the references and em yment and any pertinen I liability for any damag	t information the	y may
agreement for em	ployment for any spe	cified period of time,	company has any autho or to make any agree mpany representative".		
DATE	SIGNA	ATURE			
INTERVIEWED BY	(		DATE		
TOWN OF MINER P. O. BOX 600 MINERAL SPRING 704-243-0505 ext		1	AT:		
	DC	NOT WRITE BELO	W THIS LINE		
REMARKS					
NEATNESS		CHA	ARACTER		
PERSONALITY		ABI	ILITY		
HIRED	POSITION	WI	LL REPORT	SALARY/WAGE	:S

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