



TOWN OF PARKSLEY

Application for Employment

Position You are Applying For: _____ Desired Salary: _____
Date Available to Work: _____
PERSONAL INFORMATION

Last Name First Name Middle

Address City State Zip
Home Phone: _____ Cell Phone: _____ Email Address: _____

Social Security Number: _____
Are you a U S Citizen? Yes No
Have you ever been convicted of a felony? Yes No
If selected for employment, are you willing to submit to a pre-employment drug screening test? Yes No

EDUCATION

School Name	Location	Years Attended	Degree Received	Major

Other training, certifications, or licenses held: _____

EMPLOYMENT

Employer: _____ Dates Employed: _____
Work Phone: _____ Pay Rate: _____
Address: _____ City _____ State _____ Zip _____
Position: _____
Duties Performed: _____
Supervisor's Name and Title: _____
Reason for leaving: _____
May we contact them? Yes No

REFERENCES

Name	Title	Company	Phone

ACKNOWLEDGEMENT AND AUTHORIZATION

I certify that all answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment
as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in
my application or interview(s) may result in discharge.