

**APPLICATION FOR EMPLOYMENT
TOWN OF PEARISBURG**

Administrative Office
Municipal Building
112 Tazewell Street
Pearisburg, Virginia 24134

The Town of Pearisburg provides an equal employment opportunity to all Town employees and applicants for employment on the basis of individual merit and qualifications and without regard to race, age, color, religion, sex, national origin, political affiliation, or disability.

INSTRUCTIONS: Please fill out all sections of this application. Incomplete applications will not be considered. Your application will be used as part of the certification process and, therefore, should represent your best effort.

POSITION APPLIED FOR _____ Date of Application _____

(Give exact title)

Name _____

Last

First

Middle Name

Address _____

Street

City

State

Zip Code

Phone H(____) _____ W(____) _____

Check age category: Under 21 _____ 21 or Over _____

Are you legally eligible to work in the U.S.? Yes _____ No _____

NOTE: Upon hire applicants will be required to present documents proving identity and eligibility to work in the United States as required by the Immigration Reform and Control Act of 1986.

On what date would you be available for work: _____ Rate of pay expected \$ _____

Have you ever worked for the Town of Pearisburg? Yes _____ No _____

Which department? _____ When? _____

Do you have a valid driver's license? Yes _____ No _____ Commercial Driver's License? Yes _____ No _____

EDUCATION: Circle the highest grade you completed. 1 2 3 4 5 6 7 8 9 10 11 12

Name and location of the last high school you attended _____

Did you graduate? Yes _____ No _____ If not, have you passed a G.E.D. test? Yes _____ No _____

	School Name and Location	From	To	Date Graduated	Degree/Certificate	Major Area of Study
College or University						
Other Education						

Special Qualifications and Skills: (keyboarding, computer skills, professional licenses and certificates, kinds of office or construction equipment you can operate, publications, scholastic honors, etc.)

Are you able to fully perform the essential functions of the job for which you are applying? ____yes ____no

If no, please explain.

NOTE A disability will not bar a qualified applicant from employment if the applicant is able to perform the essential functions of the job with or without reasonable accommodation.

Have you ever been convicted of any offense against the law? Include convictions by general court martial while in the military service. ____yes ____no If yes give date, place, charge, court and fine or sentence.

NOTE: A conviction does not automatically mean that you cannot be employed. The nature and date of the conviction are important. Give all of the facts so that a decision can be made.

EXPERIENCE: Start with your present job and work back. Include military service, part-time and temporary employment, and relevant volunteer experience. Additional experience should be listed by attaching separate sheets of paper or a personal resume. Be sure to include all requested information.

Present	Dates
Employer _____	From _____ to _____
Address _____	Phone _____
Job Title _____	Average Hours per week _____
Supervisor's Name/Title _____	
Starting Salary _____	Present Salary _____
Reason for leaving _____	
Describe your work _____	

Check here and explain if you do NOT want this employer contacted for a reference. _____

Account for time between jobs (if any) _____

Employer _____ Dates: From _____ To _____
Address _____ Phone Number _____ Avg. Hrs. per Week _____
Job Title _____ Salary: Starting _____ Present _____
Supervisor's Name and Title _____ Reason for Leaving _____
Describe your Work _____

Check here and explain if you do NOT want this employer contacted for a reference. _____

Account for Time Between Jobs (if any) _____

Employer _____ Dates: From _____ To _____
Address _____ Phone Number _____ Avg. Hrs. per Week _____
Job Title _____ Salary: Starting _____ Present _____
Supervisor's Name and Title _____ Reason for Leaving _____
Describe your Work _____

Check here and explain if you do NOT want this employer contacted for a reference. _____

Account for Time Between Jobs (if any) _____

PERSONAL REFERENCES (Do not include relatives or former employers.)

Name and Occupation	Address	Phone
1		
2		
3		

USE THIS SPACE FOR ADDITIONAL OR EXPLANATORY INFORMATION

How did you learn about the job for which you are applying?

Roanoke Times and World News

Current Town Employee

The News Messenger

Other: (Describe)

Other Newspaper: (Name) _____

Friend

Job Line

May we conduct a background check of your qualifications, character, record of employment, and, if applicable, your driving record?

Yes _____ No _____ If No, please explain. _____

ATTENTION: This statement must be signed.

I certify that all of the statements made in this application are true and complete to the best of my knowledge. I understand that a false or incomplete answer may be grounds for not employing me, or for dismissing me after I have begun work.

Signature

Date