

Town of Flagler Employment Application

The Town of Flagler considers applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition, handicap, or any legally protected status.

(Please attach current resume)

Date _____

NAME _____

Social Security Number ____-____-____

Date Available for work _____

Valid Colorado Drivers License # _____

Address _____

Phone #1 _____

Phone #2 _____

Position Applying For _____

Desired Wages _____

Do you have any license or credentials for ? CDL__ Water Certification__ Sewer Certification __

List your last three employers, length of employment and reasons for leaving each.

1. _____

2. _____

3. _____

Why would you like to work for the Town of Flagler? _____

Give Name, Address and Telephone of three non-related references who are not previous employers:

1. _____

2. _____

3. _____

Describe any specialized training, skills pertinent to job applying _____

List Education; School Name and Location, Undergraduate, College/ University, Graduate/Professional

1. _____

2. _____

3. _____

Circle Years of Education 9 10 11 12 13 14 15 16 17 18

Diploma or Degree _____

Describe any specialized training skills pertinent to job applying or _____

Use additional sheet of paper if you need additional space

I certify that answers given 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. I understand that this application is not, nor is intended to be a contract of employment. In the event of employment I understand that false or misleading information given in my application and interview(s) may result in discharge. I understand that I am to abide by all policies and regulations of the Town of Flagler.

Signature _____

Date _____