

# Employment Application

## Town of New Boston

7 Meetinghouse Hill Road

PO Box 250

New Boston, NH 03070

An Equal Opportunity Employer

www.new-boston.nh.us

POSITION APPLIED FOR: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_  
Last First Middle

ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPLICANT TELEPHONE: \_\_\_\_\_

APPLICANT EMAIL: \_\_\_\_\_

DATE THAT YOU CAN START WORK: \_\_\_\_\_

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.A.?  
 Yes  No (If yes, verification will be required.)

I AM SEEKING A PERMANENT POSITION:  Yes  No

If No, Explain Briefly, \_\_\_\_\_

EDUCATION:	Yrs. Completed	Field of Study	Graduate or Degree
High School	_____	_____	_____
College/University	_____	_____	_____
Business/Technical	_____	_____	_____
Other	_____	_____	_____

MILITARY SERVICE:  Yes  No

Duty/Specialized Training: \_\_\_\_\_

### GENERAL:

Professional Licenses, Certifications or Registrations: \_\_\_\_\_

Summarize other additional employment, skills, or information regarding this position that you wish to bring to the employer's attention: \_\_\_\_\_

### ACTIVITIES:

Civic, Athletic, Etc. \_\_\_\_\_

### EMPLOYMENT: LIST LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST.

Employer Name and Address	Position Title/Duties Skills	Dates Employed	
		from	to
_____	_____	_____	_____
_____		Reason for leaving	
_____	Supervisor's Name: _____ Telephone: _____		

EMPLOYMENT CONTINUED

Employer Name and Address	Position Title/Duties Skills	Dates Employed from _____ to _____
		Reason for leaving
		Supervisor's Name: _____ Telephone: _____

Employer Name and Address	Position Title/Duties Skills	Dates Employed from _____ to _____
		Reason for leaving
		Supervisor's Name: _____ Telephone: _____

Which of these jobs did you like best? \_\_\_\_\_

What did you like most about this job? \_\_\_\_\_

**REFERENCES:** List three personal references who are not relatives or former supervisors.

Name	Address	Telephone	Occupation	Years known

In case of accident or illness please contact: Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.  
 IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE TOWN OF NEW BOSTON, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE TOWN. I UNDERSTAND THAT NO DEPARTMENT HEAD HAS THE AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT CONTARY TO THE FOREGOING."

I understand and agree to the information shown above:

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

Employer Section: \_\_\_\_\_