

## TOWN OF CHESTER Employment Application

TOWN OF CHESTER - BOS Municipal Office Building 84 Chester Street Chester, New Hampshire Phone (603) 887-3636 x114 ChesterBOS@ChesterNH.org

		Α	pplica	nt Information					
Full Name:	Last		-irst		М.І.	Date	:		
Last Address: Street Address		,	First		M.I. Apartment/Unit #				
	Street Address				Apartmenico	///// #			
Dhana; (	City	Cell Phone:	,	`	<i>State</i> Email:		ZIP Code		
Phone: (	)		(	)					
Date Available:Desired SaAre you a citizen of the United States?			\$ □	Position Ap		ork in the L	J.S.?	YES	
Have you ev Chester?	ver worked for the Town	of <sub>YES</sub>	NO	If yes, when?					
For Law Enforcement or Fiduciary Positions Only:									
Have you ever been convicted of a felony?			YES NO Have you even been con			d of a crim	e involving	YES	
lf yes, expla	in:								
			Ec	ducation					
High School	<ul> <li>City and State</li> </ul>	Cours	se of Stu	udy	Year(s)	Completed	l Diplon	na / Deg	jree
Undergraduate / College – City and State			Course of Study		Year(s)	l Diplon	Diploma / Degree		
International Campus – Country		Cours	Course of Study		Year(s) Completed			Diploma / Degree	
Graduate / Professional – City and State		State Cours	Course of Study		Year(s) Completed			Diploma / Degree	
Other (specify) – City and State		Cours	Course of Study		Year(s)	l Diplon	Diploma / Degree		
			Re	ferences					
Please list t	three professional refe	rences.							
Full Name:			Posi	tion:					
Company: Email Address:					Phone:	( )			
Full Name:			Posi	tion:					
Company: Email Address:					Phone:	( )			

Full Name:		Position:				
Company: Email Address:			Phone:	(	)	
		Previous Employmer	nt			
Company:			Phone:	(	)	
Address:			Supervisor:			
Job Title:		Starting Salary: \$		End	ling Salary:	\$
Responsibilities:						
From:	To:	Reason for Leaving:				
May we contact yo	ur previous supervi	sor for a reference?	NO			
Company:			Phone:	(	)	
Address:			Supervisor:			
Job Title:		Starting Salary: \$		End	ling Salary:	\$
Responsibilities:						
From:	To:	Reason for Leaving:				
May we contact yo	ur previous supervi	sor for a reference?				
Company:			Phone:	(	)	
Address:			Supervisor:			
Job Title:		Starting Salary: \$		End	ling Salary:	\$
Responsibilities:						
From:	To:	Reason for Leaving:				
May we contact yo	ur previous supervi	sor for a reference?				
	List Professio	onal, Trade, Business or Civic A	ctivities and O	ffices	s Held	
		Military Service	_		_	
Branch:			From: be of		To	:
Rank at Discharge		Discha	irge:			
If other than honor	able, explain:					

## Applicant's Statement

The information set forth in this application is true, complete and accurate. I understand and agree that if employed, and during such period of employment, any false statements, misrepresentations of facts, or omission made by myself become known, the Town of Chester may terminate my employment immediately. I hereby authorize the Town of Chester and/or its assigns to investigate my personal history and to obtain from my previous employers any information they have concerning me. The Town of Chester may do a comprehensive background investigation regarding the accuracy or my employment application, not excluding a Drivers Record, Financial Inquiry Report and other such investigative inquiries. Inquiries as to my character, general reputation, personal characteristics and work habits will be included and I hereby release and save harmless the Town of Chester, their assigns and other institutions, employees and their assigns from any and all liability which might otherwise be incurred by gathering such information. I understand that a physical examination, drug and alcohol use tests, and/or a pre-employment personality/performance profile review may be required.

I AGREE THAT MY EMPLOYMENT WITH THE TOWN OF CHESTER IS FOR AN UNSPECIFIED DURATION AND CONSTITUTES "AT WILL" EMPLOYMENT. I ACKNOWLEDGE THAT THERE IS NO AGREEMENT, EXPRESS OR IMPLIED, BETWEEN ME AND THE TOWN OF CHESTER FOR ANY SPECIFIC PERIOD OF EMPLOYMENT, NOR FOR CONTINUING OR LONG TERM EMPLOYMENT, THE TOWN OF CHESTER AND I EACH HAVE THE RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME WITH OR WITHOUT GOOD CAUSE, WITH OR WITHOUT NOTICE.

Signature of Applicant

Date

The Town of Chester is an Equal Opportunity Employer We consider applicants for all positions without regard to Race, Color, Religion, Creed, Gender, National Origin, Age, Disability, Marital Status, Veteran Status, or any other legally protected status

Instructions for Submitting Application

- EMAIL: <u>ChesterBOS@ChesterNH.org</u>
- MAIL: **TOWN OF CHESTER BOS** Municipal Office Building 84 Chester Street Chester, New Hampshire

## DO NOT WRITE BELOW THIS LINE

Interviewed by:	Date:
Position Offered:	If yes, what position?
Anticipated Start Date:	
Potential Salary:	