## Chester Seal

**TOWN OF CHESTER - BOS**

Municipal Office Building

84 Chester Street

Chester, New Hampshire

Phone (603) 887-3636 x114

ChesterBOS@ChesterNH.org

## TOWN OF CHESTER

## Employment Application

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| Applicant Information |
| Full Name: |       |       |     | Date: |       |
|  Last | First | M.I. |
| Address: |       |       |
|  Street Address | Apartment/Unit # |
|  |       |       |       |
|  City | State | ZIP Code |
| Phone: | (     )       | Cell Phone: | (     )       | Email: |       |
| Date Available: |       | Desired Salary: | $      | Position Applied for: |       |
| Are you a citizen of the United States? | YES[ ]  | NO[ ]  | If no, are you authorized to work in the U.S.? | YES[ ]  | NO[ ]  |
|  |  |  |  |  |
| Have you ever worked for the Town of Chester? | YES[ ]  | 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 convicted of a crime involving theft or burglary? | YES[ ]  | NO[ ]  |
| If yes, explain: |       |
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| Education |
|       |       |       |       |
| High School – City and State | Course of Study | Year(s) Completed | Diploma / Degree |
|       |       |       |       |
| Undergraduate / College – City and State | Course of Study | Year(s) Completed | Diploma / Degree |
|       |       |       |       |
| International Campus – Country | Course of Study | Year(s) Completed | Diploma / Degree |
|       |       |       |       |
| Graduate / Professional – City and State | Course of Study | Year(s) Completed | Diploma / Degree |
|       |       |       |       |
| Other (specify) – City and State | Course of Study | Year(s) Completed | Diploma / Degree |
|  |
| References |
| Please list three professional references. |
| Full Name: |       | Position: |       |
| Company: |       | Phone: | (     )       |
| Email Address: |       |
|  |  |  |  |
| Full Name: |       | Position: |       |
| Company: |       | Phone: | (     )       |
| Email Address: |       |
|  |  |  |  |
| Full Name: |       | Position: |       |
| Company: |       | Phone: | (     )       |
| Email Address: |       |

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| Previous Employment |
| Company: |       | Phone: | (     )       |
| Address: |       | Supervisor: |       |
| Job Title: |       | Starting Salary: | $      | Ending Salary: | $      |
| Responsibilities: |       |
| From: |       | To: |       | Reason for Leaving: |       |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
|  |
| Company: |       | Phone: | (     )       |
| Address: |       | Supervisor: |       |
| Job Title: |       | Starting Salary: | $      | Ending Salary: | $      |
| Responsibilities: |       |
| From: |       | To: |       | Reason for Leaving: |       |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
|  |
| Company: |       | Phone: | (     )       |
| Address: |       | Supervisor: |       |
| Job Title: |       | Starting Salary: | $      | Ending Salary: | $      |
| Responsibilities: |       |
| From: |       | To: |       | Reason for Leaving: |       |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |

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| List Professional, Trade, Business or Civic Activities and Offices Held |
|       |
|       |

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| Military Service |
| Branch: |       | From: |       | To: |       |
| Rank at Discharge: |       | Type of Discharge: |       |
| If other than honorable, explain: |       |
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| Applicant’s Statement |
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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.

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| Signature of Applicant | Date |

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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*

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Instructions for Submitting Application

EMAIL: ChesterBOS@ChesterNH.org

MAIL: **TOWN OF CHESTER - BOS**

##### Municipal Office Building

#### 84 Chester Street

Chester, New Hampshire

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| DO NOT WRITE BELOW THIS LINE |
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Interviewed by: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position Offered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If yes, what position? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anticipated Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Potential Salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_