



TOWN OF HOLLY

PO Box 458, Holly, CO 81047

APPLICATION FOR EMPLOYMENT

(Please print)

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of medical condition or handicap.

ENTIRE APPLICATION MUST BE COMPLETED FOR CONSIDERATION

Position(s) applied for: Date of Application:

Referral Source: Advertisement Friend Relative Employment Agency Other

NAME:
Last First Middle

ADDRESS:
PO Box Street City State Zip Code

PHONE NUMBER: SOCIAL SECURITY NO:
Area Code

Have you filed an application here before? Yes No Date:
Have you ever been employed here before? Yes No Date:
Are you a citizen of the United States? Yes No
Are you legally entitled to work in the country? Yes No
Are you available to work? Full Time Part Time
Are you on lay-off or subject to recall? Yes No
Are you 18 years of age or over? Yes No
Do any of your friends or relatives work here? Yes No

If yes, list name(s):

During the past 5 years, have you ever been convicted of, or have you pleaded guilty or no contest (nolo contendere) to, a felony offense? Yes No If yes, explain below:

Answering yes will not automatically bar you from employment; however, we would appreciate an explanation.

Are you a veteran of the U.S. Military Services or currently in the National Guard or Reserves? Yes No

If yes, what was your branch of U.S. military service?

EMPLOYMENT LAST 10 YEARS (Enter last job first)

Account for all periods of unemployment

Name and Address of Employer	Date		Kind of Work	Monthly Salary	Reason For leaving
	Mo/Yr	Mo/Yr			

REFERENCES

3 references not related to you

	Name	Address	Phone
1.	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
2.	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
3.	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

EDUCATION

	Elementary	High	College/University	Technical School
School Name				
Highest Years Completed				
Diploma/Degree				
Describe Course Of Study				

AGREEMENT

I certify that answers given herein 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.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

I hereby authorize my prior employer(s), to release any and all information, related to my employment with that company. I further release my former employer(s) from any and all liabilities that may result from the release and/or use of such information.

Signature of Applicant _____ Date _____