Application For Employment

Hampton Recreation & Parks Department 100 Winnacunnet Road Hampton, NH 03842 (603) 926-3932

We consider 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 or handicap or any other legally protected status.

		Please Prin	<u>ıt</u>		
Position(s) Applied for			Date of App	olication	
How did you learn about u	s? (Please circle)				
A	dvertisement	Friend	Walk-in	Relative	
O	ther:				
Last Name	Fir	rst Name	Mic	ldle Name	
Street Address		City	Stat	eZip	
Telephone #'s			Social Secu	rity #	
If you are under 18 years of Required proof of your eli		ovide		YesNo	
Have you ever filed an app	olication with us b	pefore?		YesNo	
				If yes, when	
Have you ever been emplo	yed with us before	re?		YesNo	
				If yes, when	
Are you currently employed	ed?			YesNo	
May we contact your prese	ent employer?			YesNo	
Are you prevented from la this country because of Vi (Proof of citizenship or immigra	sa or İmmigration	Status?	nent)	YesNo	

On what date would you be	e available for work?					
Are you available to work: Full Time Part Time Shift Work					Temporary	
Are you currently on "lay-off status and subject to recall? Can you travel if a job requires it? Have you be convicted of a felony with the last 7 years? (Conviction will not necessarily disqualify an applicant from employment)					No No	
						No
					If yes please explain:	
	E	ducation				
	High School		College		Other	
School Name and Location						
Major/Degree						
Describe course of study						
Describe any specialized training, apprenticeship, skills and extra-curricular activities				,		
Describe any honors you have received						

Employment Experience
Start with your present or last job. Include any job0related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Address	Phone#
Dates Employed		Hourly Rate
Job Title		Supervisor
W. 1.D. 0. 1		
Work Performed		
Reason for Leaving		
Employer	Address	Phone#
Dates Employed		Hourly Rate
Job Title		Supervisor
W. 1.D. 0		
Work Performed		
Reason for Leaving		
Employer	Address	Phone#
Dates Employed		Hourly Rate
Job Title		Supervisor
Work Performed		
Reason for Leaving		
-		

Special Skills and Qualifications Summarize special job-related skills and qualifications acquired from	n employment or other experien
ist professional, trade, business or civic activities and offices held. (You may exclude memberships which would reveal sex, race, religion, national origin, age, ance	estry, or handicap or other protected status)
eferences ive name, address and telephone number of three references who a revious employers.	are not related to you and are no
<u> </u>	
Tave you ever had any job-related training the United States military?	YesNo
Eyes, please describe	
are you physically or otherwise unable to perform the duties of the	iob for which you are applying?
and the property of carries and the perform the dates of the	Yes No