



# Application for Employment

**NOTE: If you will require special accommodations in order to apply for this position, please notify the Human Resources Department hr@claremontnh.com**

Please Print (in blue or black ink) or Type

Date: \_\_\_\_\_ Name: \_\_\_\_\_

## PERSONAL

Positions(s) applied for: \_\_\_\_\_

Availability: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Seasonal \_\_\_\_\_

Full Name: \_\_\_\_\_ Social Security # (Optional): \_\_\_\_\_

Street Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Have you ever been employed with us before? Yes \_\_\_\_\_ (if yes, provide details below ↓) No \_\_\_\_\_

Title of position held: \_\_\_\_\_ Termination Date: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Are you a retired or disabled retiree of the New Hampshire Retirement System \_\_\_\_\_ YES \_\_\_\_\_ NO

List any relative(s) who currently works for the City of Claremont:

Name: \_\_\_\_\_ Department: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Department: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Department: \_\_\_\_\_ Relationship: \_\_\_\_\_

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a citizen of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, can you provide proof that you are eligible to work in the United States in accordance with the Immigration Reform and Control Act? Yes \_\_\_\_\_ No \_\_\_\_\_

## EDUCATION

Did you receive a high school Diploma or HiSET? Yes \_\_\_\_\_ No \_\_\_\_\_

Highest grade completed: 5 \_\_\_\_\_ 6 \_\_\_\_\_ 7 \_\_\_\_\_ 8 \_\_\_\_\_ 9 \_\_\_\_\_ 10 \_\_\_\_\_ 11 \_\_\_\_\_ 12 \_\_\_\_\_ College: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_

School (name, city, state)	Dates	Degree	Major/Minor
----------------------------	-------	--------	-------------

High School	From: _____ To: _____	_____	_____
-------------	--------------------------	-------	-------

Undergraduate College/University	From: _____ To: _____	_____	_____
----------------------------------	--------------------------	-------	-------

Graduate/Professional College/University	From: _____ To: _____	_____	_____
--	--------------------------	-------	-------

Other Education i.e. Technical, Business	From: _____ To: _____	_____	_____
--	--------------------------	-------	-------



**MILITARY**

Have you ever served in the U.S. Armed Forces? Yes\_\_\_\_ No\_\_\_\_  
If yes, what branch?\_\_\_\_\_  
Type of discharge?\_\_\_\_\_  
Describe any training received which would be relevant to the position you are applying:\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPECIAL SKILLS**

List technical/professional licenses or certification you hold:\_\_\_\_\_  
\_\_\_\_\_  
List office machines, heavy equipment, vehicles and other machinery you can operate:\_\_\_\_\_  
\_\_\_\_\_  
Indicate any specialized training you have received:\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DRIVING HISTORY (USE ADDITIONAL SHEETS AS NECESSARY)**

List ALL presently unexpired motor vehicle operator's licenses you hold:

License#\_\_\_\_\_ Issuing State:\_\_\_\_\_ Expires:\_\_\_\_\_ Type:\_\_\_\_\_  
License#\_\_\_\_\_ Issuing State:\_\_\_\_\_ Expires:\_\_\_\_\_ Type:\_\_\_\_\_  
Date of Birth:\_\_\_\_\_ (Necessary to conduct motor vehicle records check.)

Provide complete motor vehicle accident record for past 7 years

Dates	Nature of Accident (head-on, rear-end, etc.)
Last Accident	_____
Next previous	_____
Next Previous	_____

Indicate ALL traffic convictions during the past 7 years (other than parking violations) and dates of ALL license suspensions or forfeitures during the past 7 years

Location	Date	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____

**CRIMINAL HISTORY**

Have you ever been arrested for or convicted of a crime that has not been annulled by a court? Yes\_\_\_\_ No\_\_\_\_

If yes, explain fully (Conviction will not automatically disqualify you from employment).  
\_\_\_\_\_  
\_\_\_\_\_



EMPLOYMENT HISTORY

(List most recent employer first, please account for any gaps in employment record)

Company: Your Title:
Street Address: Employed From:
City, State, Zip: Employed To:
May we contact your present employer? Yes No Salary or Rate of Pay: Starting Per Ending Per

Responsibilities:

Supervisor's Name: Phone

Reason for leaving:

Company: Your Title:
Street Address: Employed From:
City, State, Zip: Employed To:
May we contact your present employer? Yes No Salary or Rate of Pay: Starting Per Ending Per

Responsibilities:

Supervisor's Name: Phone

Reason for leaving:

Company: Your Title:
Street Address: Employed From:
City, State, Zip: Employed To:
May we contact your present employer? Yes No Salary or Rate of Pay: Starting Per Ending Per

Responsibilities:

Supervisor's Name: Phone

Reason for leaving:

Company: Your Title:
Street Address: Employed From:
City, State, Zip: Employed To:
May we contact your present employer? Yes No Salary or Rate of Pay: Starting Per Ending Per

Responsibilities:

Supervisor's Name: Phone

Reason for leaving:



**REFERENCES** (LIST 3 **PROFESSIONAL** REFERENCES)

Name & Occupation	Address	Phone	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**MISCELLANEOUS ADDITIONAL INFORMATION**

Have you ever applied for a position with us before? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, give date and the position:\_\_\_\_\_

Use this space for further information you think would help us evaluate your application\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**APPLICANT'S STATEMENT**  
(PLEASE READ CAREFULLY BEFORE SIGNING)

**I authorize** the City of Claremont to obtain any information from schools, residential management agents, employers, criminal justice agencies (including FBI) or individuals relating to my activities. This information may include but is not limited to academics, residential, achievements, performance, attendance, personal history, disciplinary, arrest and convictions records (both juvenile and adult). Further, I hereby authorize all references, persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and accompanying resume and other documentation supplied to me, if any) to provide the City of Claremont any relevant information that may be required to arrive at an employment decision. I understand that the information release is for the City of Claremont's use only.

**In submitting** this application for consideration and as indicated by my signature below, I hereby certify that all responses provided herein and throughout the application process are true and complete to the best of my knowledge. I authorize the City of Claremont and/or its authorized agent(s) to investigate my personal and employment history and financial and credit record. I further authorize investigation of all statements contained in this application for employment as may be deemed necessary in arriving at an employment decision. I understand that should an investigation at any time disclose any misrepresentations and/or falsifications as stated herein, upon any other employment-related forms or made during an interview(s), my application will be rejected and should I become or already be employed with the City of Claremont, my employment may be terminated.

**I understand** that if I am employed by the City of Claremont, I am required to become familiar with and abide by all rules and regulations of the City of Claremont as established and amended from time to time. I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship established with the City of Claremont is of an "at will" nature, which means that the employee may resign at any time and the City of Claremont may discharge the employee at any time with or without cause. I further understand that this "at will" employment relationship may not be changed by any written instrument or by conduct unless such change is specifically acknowledged in writing by an authorized representative of the City of Claremont.

**I release** any individual, including record custodians, from any and all liabilities for damages of whatever kind or nature which may, at any time happen to me as a result of compliance, or any attempts to comply with this authorization.

\_\_\_\_\_  
Applicants Signature (Original signature and date is required upon hire) Date