

TOWN OF HAYDEN

520 N VELASCO AVE / PO BOX B

HAYDEN, AZ 85135

P 520 -356-7801 \* F520-356-6334

**APPLICATION**

**FOR EMPLOYMENT**

We consider applications for all positions without regard to, race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information, or any other legally protected status.

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| Last Name First Name Middle NameClick or tap here to enter text. |
| Physical Address Number Street City State Zip Code Click or tap Click or tap here to enter text. |
| Mailing AddressClick or tap here to enter text.☐ The Same as Physical Address ☐ PO BOX |
| Telephone NumberClick or tap here to enter text. | Cell Phone NumberClick or tap here to enter text. | E-Mail AddressClick or tap here to enter text |

(PLEASE PRINT)

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| --- | --- |
| Position(s) ApplyingforClick or tap here to enter text. | Date of ApplicationClick or tap to enter a date. |
| How Did You Learn About Us?☐ Advertisement ☐ Relative ☐ Inquiry ☐ Employment Agency ☐ Friend ☐ Other |

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| Best time to contact you at home is: \_\_\_\_\_: \_\_\_\_\_\_AM / PMClick or tap here to enter text.If you are under 18 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ NoClick or tap here to enter text.Have you ever been employed with us before?☐ Yes☐No (If yes give the date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Click or tap here to enter text.Do any of your friends or relatives, other than spouse, work here? ☐ Yes ☐ NoClick or tap here to enter text.Are you currently employed? ☐ Yes ☐ NoClick or tap here to enter text.May we contact your present employer? ☐ Yes ☐ NoClick or tap here to enter text.Date available for work \_\_\_/\_\_\_/\_\_\_ What is your desired salary wage? \_\_\_\_\_\_\_\_\_Are you available to work: ☐ Full Time☐ Part Time ☐ Temporary Are you currently on “lay-off” status and subject to recall? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_☐ Yes ☐NoCan you travel if a job requires you to? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_☐ Yes ☐No |

**EDUCATION**

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| School | Name and Address of School | Course Study | Years Completed | Diploma Degree |
| High School  | Click or tap here to e | Click or tap here to  |  |  |
| Undergraduate College | Click or tap here to e | Click or tap here to  |  |  |
| Graduate / Professional | Click or tap here to e | Click or tap here to |  |  |
| Other (Specify) | Click or tap here to e | Click or tap here to |  |  |

**Work Experience**

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| Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status |
| EmployerClick or tap here to enter text. | Dates Employed | Work Performed |
| AddressClick or tap here to enter text. | From | To | Click or tap here to enter text. |
| Telephone Number (s)Click or tap here to enter text. | Click or tap here to enter text. |
|  Job TitleClick or tap here to enter text. | Hourly Rate/ Salary | Click or tap here to enter text. |
| SupervisorClick or tap here to enter text. | Starting | Final | Click or tap here to enter text. |
| Reason for LeavingClick or tap here to enter text. | May We Contact? Yes No |
| EmployerClick or tap here to enter text. | Dates Employed | Work Performed |
| AddressClick or tap here to enter text. | From | To | Click or tap here to enter text. |
| Telephone Number (s)Click or tap here to enter text. | Click or tap here to enter text. |
|  Job TitleClick or tap here to enter text. | Hourly Rate/ Salary | Click or tap here to enter text. |
| SupervisorClick or tap here to enter text. | Starting | Final | Click or tap here to enter text. |
| Reason for LeavingClick or tap here to enter text. | May We Contact? Yes No |

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| Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status |
| EmployerClick or tap here to enter text. | Dates Employed | Work Performed |
| AddressClick or tap here to enter text. | From | To | Click or tap here to enter text. |
| Telephone Number (s)Click or tap here to enter text. | Click or tap here to enter text. |
| Job TitleClick or tap here to enter text. | Hourly Rate/ Salary | Click or tap here to enter text. |
| SupervisorClick or tap here to enter text. | Starting | Final | Click or tap here to enter text. |
| Reason for LeavingClick or tap here to enter text. | May We Contact? ☐ Yes ☐ No |
| EmployerClick or tap here to enter text. | Dates Employed | Work Performed |
| AddressClick or tap here to enter text. | From | To | Click or tap here to enter text. |
| Telephone Number (s)Click or tap here to enter text. | Click or tap here to enter text. |
| Job TitleClick or tap here to enter text. | Hourly Rate/ Salary | Click or tap here to enter text. |
| SupervisorClick or tap here to enter text. | Starting | Final | Click or tap here to enter text. |
| Reason for LeavingClick or tap here to enter text. | May We Contact? ☐Yes ☐ No |

**Comments: Include explanation of any gaps in employment.**

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**Describe any specialized training, apprenticeship, skills, and extra-curricular activities.**

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**List professional trade, business or civic activities and offices held.**

**You may exclude membership that would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.**

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**Additional Information**

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| Other Qualifications Summarize special job-related skills and qualifications experienced from employment or other experience. |
| Click or tap here to enter text. |
| Click or tap here to enter text. |

**SPECIALIZED SKILLS (Clerical / Public Works)**

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| ☐ WordProduction/ Mobile Machinery Other (list)☐ Excel \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_☐PowerPoint \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_☐ Database \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_State any additional information you feel may be helpful to us in considering your application.

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| **Note to Applicants:DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE A FULL Job description and job requirements available at Town of Hayden upon request.**Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review on the activities involved in such a job or occupation has been given. \_\_\_YES \_\_\_NO |

**PERSONAL/ PROFESSIONAL REFERENCES *Do not include family members or past supervisors.***

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| Name | Phone Number | Best Time to Call | Occupation |
| 1.Click or tap here to | Click or tap here to | Click or tap here to | Click or tap here to |
| 2.Click or tap here to | Click or tap here to | Click or tap here to | Click or tap here to |
| 3.Click or tap here to | Click or tap here to | Click or tap here to | Click or tap here to |

**APPLICANT’S STATEMENT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| I certify that answers given herein are true and complete.I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.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 employer.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Applicant Date |

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| **FOR PERSONNEL DEPARTMENT USE ONLY** |
| Arrange Interviews ☐Yes ☐NoRemarks:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Interviewer DateEmployed ☐Yes ☐No Date of Employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Hourly Rate/Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Salary \_\_\_\_\_\_\_\_\_ Department\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name and Title Date |