

# Town of Abingdon

## Employment Application

*An Equal Opportunity / Affirmative Action Employer*



133 West Main Street  
P. O. Box 789

Abingdon, Virginia 24212

(276) 628-3167  
Fax (276) 628-9986

**INSTRUCTIONS:** It is important that you fill out all sections of this application completely and to the best of your ability. Your application will be used as part of the examination process and, therefore, should represent your best effort.

### Current Information

Position Applied For _____		Date _____	
When will you be available for employment? _____	Are you seeking: Full-time permanent <input type="checkbox"/> Part-time permanent <input type="checkbox"/> Temporary <input type="checkbox"/> Summer work <input type="checkbox"/>		
NAME _____			
Last	First	Middle	
PRESENT ADDRESS _____			
Street & No., RFD, or P. O. Box	City	State	Zip
PERMANENT ADDRESS _____			
Street & No., RFD, or P. O. Box	City	State	Zip
TELEPHONE _____	If neither, where can you be reached? _____		
Home	Business		

### General Information (Attach additional sheet if need-

a. Have you ever been employed with the Town of Abingdon If yes, what department and when? _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>
b. Apart from absences for religious observations, will you accept employment requiring occasional night work or weekend work?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
c. Apart from absences for religious observations, will you accept employment requiring regular night work, weekend work, or rotating shifts?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Comments _____		
d. Are you related by blood or marriage to any Town employee? If yes, give name, relationship and department _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>
e. Have you ever been convicted of a felony? If yes, please explain _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<p><b>NOTE:</b> A conviction record will not necessarily exclude you from employment. Factors such as age at time offense, rehabilitation efforts, how recent the offense was, and nature of the crime will be taken into consideration.</p>		
f. If you are applying for a position as a Bus Driver, Public Safety Officer or another position involving significant driving, please list your driver's license number and the state where it was issued. _____		

## Education

Give your complete educational history below

Ending Date Circle highest school year completed  
 1 2 3 4 5 6 7 8 9 10 11 12

High School \_\_\_\_\_  
Name City State Month/Year

Have you received a high school diploma or equivalent? YES  NO  If yes, when? \_\_\_\_\_

Education Beyond High School	Name and Location	Attended				Circle Number Years Completed	Credit Hours	Degree or Diploma	Year Received	Major Subject
		From		To						
		Mo.	Yr.	Mo.	Yr.					
College or University										
Graduate or Professional										
Technical Inst., Internship, Other										

## Skills, Certifications

Please list any skills, abilities, special certifications, licenses, special training, or courses you have had that you feel are applicable to the position for which you applied. Include skills with equipment or machines you operate. If you wish consideration for a secretarial position, indicate speeds for typing and shorthand.

- |           |           |
|-----------|-----------|
| (a) _____ | (f) _____ |
| (b) _____ | (g) _____ |
| (c) _____ | (h) _____ |
| (d) _____ | (i) _____ |
| (e) _____ | (j) _____ |

# Employment

Record your complete work history in the spaces below. Begin with your current or most recent employer first. Attach as many sheets as is necessary to account for your full record. Be sure to account for gaps in your employment history. Related volunteer experience should also be listed.

## A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title	_____	Starting Salary	_____	Last Salary	_____
Name and title of supervisor	_____	No. employees supervised by you	_____		
Employer or company	_____	Address	_____		
Date Employed	_____	Telephone No.	_____		
Date Separated	_____	Duties	_____		
Full-time for:	Years	Months	_____		
	_____	_____	_____		
Part-time for:	Years	Months	_____		
	_____	_____	_____		
If part-time, number of hours worked per week	_____	Reason for leaving	_____		
	_____		_____		
If you are currently employed, may we inquire of this employer about your qualifications and character? YES <input type="checkbox"/> NO <input type="checkbox"/>					

## B. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

Job Title	_____	Starting Salary	_____	Last Salary	_____
Name and title of supervisor	_____	No. employees supervised by you	_____		
Employer or company	_____	Address	_____		
Date Employed	_____	Telephone No.	_____		
Date Separated	_____	Duties	_____		
Full-time for:	Years	Months	_____		
	_____	_____	_____		
Part-time for:	Years	Months	_____		
	_____	_____	_____		
If part-time, number of hours worked per week	_____	Reason for leaving	_____		
	_____		_____		

## C. NEXT EMPLOYMENT (or explain gap in employment)

Job Title	_____	Starting Salary	_____	Last Salary	_____
Name and title of supervisor	_____	No. employees supervised by you	_____		
Employer or company	_____	Address	_____		
Date Employed	_____	Telephone No.	_____		
Date Separated	_____	Duties	_____		
Full-time for:	Years	Months	_____		
	_____	_____	_____		
Part-time for:	Years	Months	_____		
	_____	_____	_____		
If part-time, number of hours worked per week	_____	Reason for leaving	_____		
	_____		_____		

## Employment (continued)

D. NEXT EMPLOYMENT (or explain gap in employment)

Job Title _____	Starting Salary _____	Last Salary _____
Name and title of supervisor _____	No. employees supervised by you _____	
Employer or company _____	Address _____	
Date Employed _____	Telephone No. _____	
Date Separated _____	Duties _____	
Full-time for:    Years    Months	_____	
Part-time for:    Years    Months	_____	
If part-time, number of hours worked per week _____	Reason for leaving _____	

(Attach additional sheets if this does not account for your full record.)

## References

Please do not list family relatives. We recommend listing persons such as co-workers, teachers, etc., who have knowledge of your qualifications for the position for which you are applying. Do not repeat names of supervisors listed with your employment record unless they can no longer be contacted at those addresses. Include complete addresses. If we may contact by telephone, please list the appropriate number.

(a) Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
\_\_\_\_\_

(b) Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
\_\_\_\_\_

(c) Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
\_\_\_\_\_

I certify that, to the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly misrepresented or falsified any of the application information I may be disqualified for employment consideration or dismissed from employment with the Town.

I authorize my current and former employers to give any information regarding my employment, together with any information regarding me whether or not it is on their records. I hereby release them from any damage whatsoever for issuing same. I also permit the Town of Abingdon to conduct a Police and Court Records investigation of my background.

I also authorize schools and other educational institutions which I may have attended to reveal my scholastic ratings to Town of Abingdon representatives who are investigating my educational background.

Signature \_\_\_\_\_ Date \_\_\_\_\_