



**EMPLOYMENT HISTORY**

(Please list your most recent employer first, and account for any gaps in employment.)

Company:

Full Address:

Your Title:

Employed From:

Employed To:

Salary or Rate of Pay

Starting:

Ending:

Responsibilities:

Supervisor's Name:

Phone Number: ( )

Reason for Leaving:

May we contact your present employer? NO ( ) YES ( )

Company:

Full Address:

Your Title:

Employed From:

Employed To:

Salary or Rate of Pay

Starting:

Ending:

Responsibilities:

Supervisor's Name:

Phone Number: ( )

Reason for Leaving:

Company:

Full Address:

Your Title:

Employed From:

Employed To:

Salary or Rate of Pay

Starting:

Ending:

Responsibilities:

Supervisor's Name:

Phone Number: ( )

Reason for Leaving:

IF NEEDED, PLEASE ATTACH ADDITIONAL SHEETS  
TO INCLUDE ADDITIONAL EMPLOYMENT HISTORY.

MILITARY SERVICE	
Have you ever served in the U.S. Armed Forces?    YES ( )    NO ( )	
If YES, what branch?	
Type of Discharge:	Date of Discharge:
Describe any training which would be relevant to the position for which you are applying:	

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

DRIVER'S LICENSES			
List all unexpired motor vehicle operator's licenses you hold:			
License #	Issuing State	Expiration Date	License Type

REFERENCES			
List three (3) personal references who are not former employers or related to you:			
Name and Occupation	Full Address	Phone Number	Relationship

**PLEASE ATTACH ADDITIONAL SHEETS IF NECESSARY**

**MISCELLANEOUS ADDITIONAL INFORMATION**

Have you ever applied for a position with the Town before? YES ( ) NO ( )

If YES, give date and position:

Use this space for any further information you think would help us evaluate your application:

Empty space for additional information.

**CERTIFICATION AND AGREEMENT**

**PLEASE READ CAREFULLY BEFORE SIGNING**

I understand that acceptance of this application by the Town of Kingston does not imply that I will be employed. The information that I have provided is true and complete. I understand that misrepresentation or omission of any fact in my application, resume, or in any other materials or as provided during interviews, can be justification for refusal of employment or can be justification for termination from employment, if employed.

I understand that any offer of employment that I receive from the Town of Kingston is contingent upon my successful completion of the pre-employment screening process including but no limited to the Town of Kingston receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry if required, satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination.

In processing my application for employment, the Town of Kingston may verify all of the information provided by me concerning, among other things, my prior employment or military record, education, character, general reputation and personal characteristics. I authorize the Town to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting my present and former employers, by contacting individuals listed as business, educational or personal references, and by contacting other individuals to provide or further clarify information about me.

I hereby release my present and former employers and all individuals contacted for factual information about me from any and all liability for damages arising from furnishing the requested information.

If employed by the Town of Kingston, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to undergo a physical examination, that I may be subject to drug and/or alcohol testing, that the Town may require a Criminal Offense Record Inquiry (CORI check) on me, investigate my driving record or verify my license(s) or certifications(s) as required for employment at any time during my employment. As a condition of employment an employee may be required to provide additional or updated information, and may require both drug testing and an employment physical in order to allow us to have the necessary information for making a proper decision or reasonable accommodations, if necessary.

I understand that the Town of Kingston is an at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.

*My Signature Certifies that I have read and agree with the above statement and all statements contained in this application for employment.*

\_\_\_\_\_  
Applicant's Signature  
Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant Name (Print)

**THE TOWN OF KINGSTON  
IS AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER**