Employment Application APPLICANTS SHALL BE AFFORDED EQUAL

APPLICANTS SHALL BE AFFORDED EQUAL OPPORTUNITY IN ALL ASPECTS OF EMPLOYMENT WITHOUT REGARD TO RACE, COLOR, RELIGION, POLITICAL AFFILIATION, NATIONAL ORIGIN, DISABILITY, SEX OR AGE.



Town of Boykins

18206 Virginia Ave Boykins, VA 23827 757-654-6361

Applicant Information								
Full Name: Social Security #:	Last	First	<u>د</u>	М		Birth:		
Address:	Street Address					Apartment/Unit #		
Mailing Address:	City				State	ZIP Code		
	Street Address					Apartment/Unit #		
Phone:	City			Email	State	ZIP Code		
Date Available:YES NO Are you currently employed?			Desired Salary: <u>\$</u> If yes, may we contact		YES NO			
Position(s) A	Applied for:					Part Time Full Time		
Are you a citizen of the United States?			YES NO If no, are you authorized to work in the U.S.? \Box					
Have you ev	ver worked for this company?	YES	NO □	If yes, when?				
Do you have readily obtai	e a driver's license or able to in one?	YES	NO □	If yes, when?				
YES NO Have you ever been convicted of a felony?								
If yes, explain:								
Plazza list	three professional references.		Refe	erences				
Full Name:					Polotionshin:			
Company:								
Address:								
Full Name:					Relationship:			
Company:					Phone:			
Address:								

Previous Employment								
Company:					Phone:			
Address:					Supervisor:			
Job Title:	Starting S		Ending Salary:\$					
Responsibil	ties:							
From:	То:	Reaso	n for Le	aving:				
May we con	tact your previous supervisor for a reference?	YES						
Company:					Phone:			
Address:					Supervisor:			
Job Title:	Starting S		Ending Salary:					
Responsibil	ties:							
From:	То:	Reaso	n for Le	aving:				
May we con	tact your previous supervisor for a reference?	YES						
Company:					Phone:			
Address:					Supervisor:			
Job Title:	Starting S		Ending Salary:					
Responsibil	ties:							
From:	То:	Reaso	n for Le	aving:				
May we con	tact your previous supervisor for a reference?	YES						
	Educ	cation						
High Schoo	: Address	:						
From:	To: Did you graduate	YES ?	NO □	Diplom	a:			
College:	Address							
From:	To: Did you graduate	YES ?	NO □	Degre	e:			
Other:	Address	:						
From:	To: Did you graduate?	YES ?	NO □	Degre	e:			

Military Service						
Branch:	From: To:					
Rank at Discharge:	Type of Discharge:					
If other than honorable, explain:						
Disclaimer and Signature						
I certify that my answers are true and complete to the best of my knowledge.						
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
Signature:	Date:					

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