



City of Vergennes  
PO Box 35  
Vergennes, VT 05491

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES NO

Have you ever terminated from a position or asked to resign in lieu of termination? YES NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_

Concentration and Coursework: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_

Concentration and Coursework: \_\_\_\_\_

## References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

**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: \_\_\_\_\_

**Background Check Release**

*I authorize the City of Vergennes to conduct a background investigation.*

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Present Address: \_\_\_\_\_  
Street Address Apartment/Unit #

Prior Address: \_\_\_\_\_  
City State ZIP Code

Street Address Apartment/Unit #

City State ZIP Code

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State: \_\_\_\_\_

Other Names Used: \_\_\_\_\_

*I HEREBY AUTHORIZE THE RELEASE TO THE CITY OF VERGENNES/VERGENNES POLICE DEPARTMENT ANY INFORMATION HELD BY ANY PARTIES REGARDING MY PRIOR EMPLOYMENT, CRIMINAL, CREDIT, DRIVING, WORKERS' COMPENSATION AND EDUCATIONAL HISTORY AS WELL AS INFORMATION REGARDING MY GENERL CHARACTER AND REPUTATION*

*I RELEASE ANY PROVIDERS OF SUCH INFORMATION FROM ANY LIABILITY FOR PROVIDING SAME. I UNDERSTAND THE INFORMATION MAYBE REVIEWED INITIALLY AND PERIODICALLY BY THE CITY OF VERGENNES/VERGENNES POLICE DEPARTMENT IF REQUESTED BY FOR REPORTING TO MY PROSPECTIVE/ACTUAL EMPLOYER. I AGREE THAT ANY FALSIFICATION MAY MAKE ME INELEGIBLE FOR EMPLOYMENT OR SUBJECT TO IMMEDIATE DISMISSAL, IF HIRED. I FURTHER ACHKNOWLEDGE THAT THE CITY OF VERGENNES/VERGENNES POLICE DEAPERTMENT IS RELYING ON A THIRD PARTY INFORMAT, AND I THEREFORE, RELEASE THE CITY OF VERGENNES/VERGENNES POLICE DEPARTMENT, MY PROSPECTIVE EMPLOYER, AND THEIR RESPECTIVE OWNERS, OFFICERS, AGENTS AND EMPLOYEES FROM ANY AND ALL LIABILITY ARISING OUT OF ERRORS OR OMMISSION. IF NOT HIRED BASED ON REPORT INFORMATION, I UNDERSTAND.*

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

## THE CITY OF VERGENNES IS AN EQUAL OPPORTUNITY EMPLOYER

AS EMPLOYERS / GOVERNMENT CONTRACTORS, WE COMPLY WITH GOVERNMENT REGULATIONS AND AFFIRMATIVE ACTION RESPONSIBILITIES. SOLELY TO HELP US COMPLY WITH GOVERNMENT RECORD KEEPING, REPORTING AND OTHER LEGAL REQUIREMENTS, PLEASE COMPLETE THE APPLICANT DATA RECORD. THE FORM IS VOLUNTARY. IT WILL BE KEPT IN A CONFIDENTIAL FILE SEPARATE FROM THE APPLICATION FOR EMPLOYMENT. THE CITY OF VERGENNES IS AN EQUAL OPPORTUNITY EMPLOYER WHICH PROHIBITS DISCRIMINATION BASED ON RACE, AGE, SEX, COLOR, MARITAL STATUS, CONDITION OR HANDICAP, RELIGIOUS CREED, SEXUAL ORIENTATION, NATIONAL ORIGIN, OR ANY OTHER NON-MERIT FACTOR. WE APPRECIATE YOUR COOPERATION.

### **GENDER**

CHECK ONE:  Male  Female

### **RACE**

CHECK ONE:  White  
 Black or African-American  
 Native Hawaiian/Pacific Islander  
 American Indian/Alaskan Native  
 Asian  
 Two or More Races

### **ETHNICITY**

CHECK ONE:  Hispanic or Latino  
 Non Hispanic or Latino