

APPLICATION FOR EMPLOYMENT

(PLEASE PRINT OR TYPE)



Town of Yountville
"The Heart of the Napa Valley"

6550 Yount St.
Yountville, CA 94599
Ph. 707-944-8851 – Fax 707-944-9619

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. Offers of employment are contingent upon submission of proof of identity and work eligibility such as a Social Security Card. You will only be considered for this position if this application is completed in its entirety. Please attach your resume if it provides additional information to assist in the evaluation of your qualifications.

POSITION APPLIED FOR _____

Name: _____
(Last) (First) (M.I.) (Social Security Number)

Address: _____
(Street) (City) (Zip) (Home Phone)

_____ (Cell Phone) _____ (Emergency Contact) _____ (E-mail Address)

EDUCATION AND TRAINING

	Name/Address	Diploma/Degree	Major
High School:	_____	_____	_____
College:	_____	_____	_____
Other:	_____	_____	_____

WORK EXPERIENCE – for the last 10 years (Begin with the most recent. Account for all employment lapses and list promotions separately; use more pages if necessary).

Position: _____ Supervisor: _____

Firm Name: _____ Phone: _____

Address: _____ From: _____ to _____

Duties: _____

Salary: _____ Reason for leaving: _____

Position: _____ Supervisor: _____

Firm Name: _____ Phone: _____

Address: _____ From: _____ to _____

Duties: _____

Salary: _____ Reason for leaving: _____

Position: _____

Supervisor: _____

Firm Name: _____

Phone: _____

Address: _____

From: _____ to _____

Duties: _____

Salary: _____ Reason for leaving: _____

Position: _____

Supervisor: _____

Firm Name: _____

Phone: _____

Address: _____

From: _____ to _____

Duties: _____

Salary: _____ Reason for leaving: _____

SKILLS AND ABILITIES/LICENSES AND CERTIFICATIONS

Typing Speed (net wpm) _____

Computer Skills: _____ Software _____

California Drivers License No.: _____ Type A B C Expiration Date: _____

Other certifications, skills or abilities (include certification number expiration date)

OTHER INFORMATION

1. Do you require any special accommodations to perform the duties of this position? Yes No
If yes, describe the functions that cannot be performed:

Note: We comply with ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and skill and agility tests. Initial _____

2. Do you have any relatives that work for the Town of Yountville? Yes No
If yes, please identify in this space:

3. Are you willing to work?

Overtime	<input type="checkbox"/> Yes <input type="checkbox"/> No	Temporary Work	<input type="checkbox"/> Yes <input type="checkbox"/> No
Nights/ Evenings	<input type="checkbox"/> Yes <input type="checkbox"/> No	Part Time Work	<input type="checkbox"/> Yes <input type="checkbox"/> No
Weekends	<input type="checkbox"/> Yes <input type="checkbox"/> No	Standby Work	<input type="checkbox"/> Yes <input type="checkbox"/> No

4. How did you learn about this job opening?

Newspaper Trade or Professional Journal Town Employee
 Other (specify) _____ Referred by: _____

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I authorize checking of my references except for:

All references/Employers All, except current employer Other: _____

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 Town of Yountville.

Signature: _____ Date: _____

The Town of Yountville is an Equal Opportunity Employer