



Farmington Parks & Recreation
531 Main Street, The Old Town Hall
Farmington, NH 03835
(603) 755-2405
rpconway@metrocast.net

Director: Rick Conway

Assistant Director: Alisha Randall

Application for Employment

Personal information:

Name: _____ Phone: _____

Position applying for: _____ Date of application: _____

Mailing Address: _____

E-mail address: _____

Social Security Number: _____ Date of birth: _____

DRIVERS LICENSE # _____ STATE: _____

(D.O.B, Social Security Number and Drivers License # is used for background check only)

If you are under 18 and we require a work permit, can you furnish one? yes no

Have you ever worked for the Town of Farmington? yes no If yes, when? _____

Are you a citizen of the United States? yes no if no, do you have papers? yes no

Type of employment desired: Full time Part time Temporary Seasonal

Have you ever plead guilty or no contest to or been convicted of a crime? yes no

If yes please give details: _____

Answering yes to these questions does not constitute an automatic rejection to employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be consideration.

Please list any recreation or youth related work experience you have:

Please state any additional information you feel may be helpful to us in considering your application:

'The Town of Farmington prohibits discrimination on the basis of race, color, national origin, sex, sexual orientation, religion, age, disability, marital or family status. The Town of Farmington is an equal opportunity employer.'

Education:

High School attended: _____ Graduation date or current year: _____

Please list any extracurricular activities, clubs, sports etc.: _____

College or University: _____ Graduation date or current year: _____

Major Course of Study: _____

Please list any extracurricular activities, clubs, sports etc. at the college level: _____

Employment Experience:

(Please list all work experience beginning with your most recent or attach a copy of your resume)

Employer:	Dates:	Job Description:

References:

Please furnish the names, addresses and telephone numbers of two people to whom you are not related to:

1. Name: _____

Address: _____

Phone number: _____

2. Name: _____

Address: _____

Phone number: _____

I certify that my answers are complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature: _____ **Date:** _____

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