VILLAGE OF GRAFTON

Application for Employment Please print in ink or type all information required

Last Name	First Nan	ne	Middle Name	Middle Name	
If you have a different name	full Social Security	Social Security Number			
Permanent Address (House N	lo. and Stree	et, City, State, Zip Code) If differ	rent from Present addre	ess	
Area Code- Phone number		a U.S. Citizen? If not, show type signed	Are you 18 year	s of age or older	
Drivers License Number/Stat	e/Class		***************************************		
			10000		
Many areas in the Village ope Please specify IF YOU ARE	erate continu UNABLE to	ously, that is, 24 hours a day, 7 controls work at any specific times or day	days a week. 1ys. NO RE	ESTRICTIONS	
	****	U.S. Military			
Branch of U.S. Armed Forces/Nat'l. Guard/Reserves		Date Entered		Date Discharged	
Rank or Rating When Entered		Rank or Rating When Dischar Type or Discharge	ged or Separated	Highest rank or Rating Attained	
Describe your duties		Serial Number	(Social Security Numb	per)	
List any special training	***************************************		70°		
		References	T		
***************************************	Do not incl	ude Relatives, Clergy or former	Employers		
Name		Complete Address (Incl	ude Zip Code)		
Position or Occupation	Со	Company or Organization		Phone Number	
Name	Со	omplete Address (Include Zip Co	de)		
Position or Occupation	Со	Company or Organization		Phone Number	
Name	Со	emplete Address (Include Zip Coe	de)	4.00 d d d d d d d d d d d d d d d d d d	
Position or Occupation	Со	mpany or Organization	Phone Numb	Phone Number	
Name	Co	mplete Address (include Zip Coo	de)	***************************************	
Position or Occupation	Cor	mpany or Organization	Phone Numb	Phone Number	

Education					
Name of School	Complete Address (Include Zip)	Circle highest year completed at time of application	Did you Graduate?	Degree Received	
High School		10 11 12			
College		1 2 3 4			
Graduate School		1 2 3 4			
OTHER (High School Equivalent, Business School, G.E.D., etc.)					
Special Skills or Abilities					

	Empl	loyment Experienc	ee e	THE CONTRACTOR OF THE CONTRACT
	List last employ	er first. Include Mili	tary Service	
Name of Company and Complete Address	Your Occupation and Duties	Dates Employed From To	Pay Rate	Reason for Leaving
	Occupation	From:	\$	
	Duties	To:	Per	
	Occupation	From:	\$	
	Duties	To:	Per	
	Occupation	From:	\$	
	Duties	To:	Per	
	Occupation	From:	\$	
	Duties	To:	Per	

Applicant - Read Carefully Before Signing

I certify the information presented in this Employment Application is correct and hereby give the Village of Grafton the right to make an investigation based on the information provided. I also understand that misrepresentation of information is grounds for disqualification from further consideration for, or termination from employment.

I understand I may, if hired, terminate my employment with the Village at anytime. The Village may also terminate my employment and compensation at anytime, with or without cause. Nothing contained in the Employment Application, the granting of an interview or the acceptance of an offer of employment is intended or to be construed as a contract of employment.

DATE:	SIGNATURE
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