

APPLICATION FOR EMPLOYMENT  
TOWN OF OTIS  
P.O. Box 95 – 102 S. Washington Ave.  
Otis, CO 80743  
(970) 246-3235  
townofotis@gmail.com

Completed application may be delivered in person, mailed, or e-mailed .

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
          First                    Middle                    Last

Current Address: \_\_\_\_\_  
  Street    City    State                    Zip

If at current address less than 3 years, list below all residences for the past 3 years. Attach a separate sheet if necessary.

\_\_\_\_\_  
Street    City    State                    Zip

\_\_\_\_\_  
Street    City    State                    Zip

\_\_\_\_\_  
Street    City    State                    Zip

Date of Birth: \_\_\_\_\_ Social Security No. \_\_\_\_\_

In case of emergency, notify: \_\_\_\_\_ Phone: \_\_\_\_\_

Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City    State                    Zip

Position Applied For: \_\_\_\_\_ Part-Time \_\_\_ Full-Time \_\_\_

Who Referred You? \_\_\_\_\_ Rate of Pay Expected: \_\_\_\_\_

Have you worked for the Town before? \_\_\_\_\_ Dates: From \_\_\_\_\_ to \_\_\_\_\_

Position: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Names of any relatives working for the Town: \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If not, how long since employed? \_\_\_\_\_

**Education**

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College: 1 2 3 4 5 6 7

Last school attended: \_\_\_\_\_  
  Name    City    State

**General**

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, please explain fully on a separate piece of paper. Conviction of a crime is not an automatic bar to employment; all circumstances will be considered.

**Employment Record**

Start with your most current employer, and work back to list all employers in the last 3 years.

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Dates: \_\_\_\_\_  
Position Held: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Dates: \_\_\_\_\_  
Position Held: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Dates: \_\_\_\_\_  
Position Held: \_\_\_\_\_ Salary: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

**Driving Experience and Qualifications**

Driver's license information:

State Issuing License	License No.	Type	Expiration Date
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Have you ever been denied a license to operate a motor vehicle? \_\_\_\_\_  
Has any license, permit or privilege ever been suspended or revoked? \_\_\_\_\_  
If you answered yes to either of these questions, please give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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The Town of Otis is an Equal Opportunity Employer. We adhere to a policy of making all employment decisions without regard to race, color, sex, religion, national origin, age, handicap, or veteran status. We assure you that your opportunity for employment with the Town of Otis depends solely on your qualification to perform the job for which you are applying.

I understand that incorrect or misleading statements on this application may be cause for dismissal at any time, if employed.

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Signature of Applicant