



Working Together - We Can Make It Work

An Equal Opportunity Employer
Applicants May Be Tested for Illegal 'Drugs

TOWN of CHESWOLD
691 Main Street
P.O. Box 220
Cheswold, Delaware 19936
Phone: 302-734-6991
Fax: 302-734-1355

PERSONAL

Name: _____
(Last) (First) (Middle) (Maiden - if applicable)

Address: _____
(Street #) (Street Name) (City) (State) (Zip)

Home Phone: _____ **Cell Phone:** _____
(Area Code) (Phone Number) (Area Code) (Phone Number)

E-Mail Address: _____

Best Contact Method: Home Phone - Cell Phone - E-Mail -

The following information may be required if hired:

Date of Birth: _____ **Social Security #:** _____ - _____ - _____

DRIVING INFORMATION

Driver's License #: _____ **State:** _____ **Expiration Date:** _____

Type of Driver's License: Operator - Commercial (CDL) - Chauffeur -

Have you had any accidents in the past three, (3), years? NO - YES - **How many?** _____

Have you had any moving violations in the past three, (3), years? NO - YES -
How many? _____

MILITARY

Have you ever been in the Armed Forces? NO - YES -

Speciality: _____ **Branch:** _____ **Final Rank:** _____

Date Entered: _____ **Discharge Date:** _____

Are you now a member of the National Guard? NO - YES -

Speciality: _____ **Branch:** _____ **Current Rank:** _____

Date Entered: _____ **Anticipated Discharge Date:** _____

TOWN of CHESWOLD
HIRING APPLICATION

EDUCATION / TRAINING

	High School	College/University	Business or Trade School
Name of School			
Location (Complete Mailing Address)			
# of Years Completed			
Major/Degree			

If you don't have a High School Diploma, do you have a high school equivalency certificate, (GED)?

NOT APPLICABLE -

NO -

YES -

Please list any other special skills, training or talents, (*language, machine operation, etc.*), that may be of special benefit to the position for which you are applying or to the Town.

EMPLOYMENT HISTORY/EXPERIENCE

A resume may be attached as a supplement to, but not in lieu of, this section.
List all positions and/or jobs held in the past ten years. Please start with the most recent.

Employer: _____	Phone #: _____			
Address: _____				
(Street #)	(Street Name)	(City)	(State)	(Zip)
Position Title: _____		Supervisor: _____		
Employment Dates: From _____ To _____		Hourly/Salary Rate: _____		
		(Starting)	(Final)	
Work Performed: _____				

Reason for Leaving: _____				

TOWN of CHESWOLD
HIRING APPLICATION

EMPLOYMENT HISTORY/EXPERIENCE

Employer: _____ **Phone #:** _____

Address: _____
(Street #) (Street Name) (City) (State) (Zip)

Position Title: _____ **Supervisor:** _____

Employment Dates: From _____ To _____ **Hourly/Salary Rate:** _____
(Starting) (Final)

Work Performed: _____

Reason for Leaving: _____

Employer: _____ **Phone #:** _____

Address: _____
(Street #) (Street Name) (City) (State) (Zip)

Position Title: _____ **Supervisor:** _____

Employment Dates: From _____ To _____ **Hourly/Salary Rate:** _____
(Starting) (Final)

Work Performed: _____

Reason for Leaving: _____

Employer: _____ **Phone #:** _____

Address: _____
(Street #) (Street Name) (City) (State) (Zip)

Position Title: _____ **Supervisor:** _____

Employment Dates: From _____ To _____ **Hourly/Salary Rate:** _____
(Starting) (Final)

Work Performed: _____

Reason for Leaving: _____

TOWN of CHESWOLD
HIRING APPLICATION

REFERENCES

Please list two, (2), references, that we may contact - other than relatives

Name: _____	Name: _____
Position: _____	Position: _____
Company: _____	Company: _____
Address: _____	Address: _____
_____	_____
Phone #: _____	Phone #: _____

An application form sometimes makes it difficult to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the following position.

DESIRED POSITION

Desired Position: _____ Desired Salary: _____ or _____
(Hourly) (Yearly)

Type of Employment: Regular Full Time: Part Time - # Hours per Week: _____ Temporary:

How many hours can you work weekly? _____

Days Available to Work

(Check all that apply)

Can you work nights? _____

No Pref. _____ Thur. _____

Can you work overtime? _____

Mon. _____ Fri. _____

Can you lift a minimum of 40 lbs.? _____

Tue. _____ Sat. _____

Are you computer literate? _____

Wed. _____ Sun. _____

Word

Excel

Power Point

Outlook

Other: _____

TOWN of CHESWOLD
Human Resources Department
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P.O. Box 220
Cheswold, Delaware 19936
Phone: 302-734-6991
Fax: 302-734-1355
cheswoldoffice@comast.net
www.cheswold.delaware.gov

PLEASE READ CAREFULLY AND SIGN BELOW

I understand that I am required to provide the Town of Cheswold with a criminal background report and a driving record report, at my expense.

Additionally, I understand that any false answers, statements or omissions made by me on this application or any other required documents will be considered sufficient cause for denial of employment or termination of employment.

I hereby give the Town of Cheswold the right to make a thorough investigation of my past employment, education and activities.

I release the Town of Cheswold and all person, companies and corporations from all liability of providing such information.

In consideration of my employment, I agree to conform to the rules and regulations for employees of the Town of Cheswold.

I understand that any offer of employment is contingent upon successful completion of pre-employment health requirements, including testing for controlled substances.

I understand that my employment and compensation can be terminated with or without cause and with or without notice, at any time, at the option of either the Town of Cheswold or myself.

I further understand that nothing contained in this employment application or in the granting of an interview shall be construed as an offer of employment or an employment contract between the Town of Cheswold and myself, for either employment and/or for the providing of any benefit.

I also understand that no manager or employee of the Town of Cheswold has any authority to enter into any oral employment for any specific period of time, or to make any agreement contrary to the foregoing. And I understand that any promises or guarantees are not binding upon the Town of Cheswold, unless made in writing.

APPLICANT SIGNATURE: _____ **DATE:** _____