



Town of Wiggins  
 304 Central Avenue  
 Wiggins, CO 80654  
 970-483-6161 Fax: 970-483-7364  
 www.wigginsco.com

## APPLICATION FOR EMPLOYMENT

Position Applied For: \_\_\_\_\_

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

FOR OFFICE USE ONLY

Received By: \_\_\_\_\_

Date Received: \_\_\_\_\_

Attached Pages: \_\_\_\_\_

|                      |                   |  |          |
|----------------------|-------------------|--|----------|
| First Name           | Middle            | Last Name  |          |
| Street Address       | City              | State  | Zip Code |
| Mailing Address      | City              | State  | Zip Code |
| Daytime Phone Number | Home Phone Number | How did you learn about us?<br>___ Advertisement     ___ Website: _____<br>___ Friend/Relative    ___ Other: _____ |          |
| Email Address: _____ |                   |  |          |

- If you are under 18 years of age can you provide proof of your eligibility to work?      Yes  No
- If hired, can you provide proof of your legal right to live and work in the U.S.?      Yes  No
- Are you able to perform the essential functions of the job for which you are applying?      Yes  No

If no, please describe the functions of duties you are unable to perform: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been employed at the Town of Wiggins?      Yes  No

If yes, give position and dates of employment \_\_\_\_\_

Do you have any friends or relatives employed at the Town of Wiggins?      Yes  No

If yes, give name and relationship \_\_\_\_\_

Are you currently employed?      Yes  No

May we contact your current employer?      Yes  No

Are you currently on "lay-off" status subject to recall?      Yes  No

Are you available to work:      Full Time      Part Time      Temporary      Seasonal

On what date are you available to begin work? \_\_\_\_\_

If your job required driving please provide driver's license number, state issued and expiration date: \_\_\_\_\_

Have you been convicted of a felony within the last seven years?      Yes  No

If yes, please explain \_\_\_\_\_  
 \_\_\_\_\_

(A conviction will not necessarily disqualify applicant from the position applied for.)



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**EDUCATION**

|                                     | School Name and Location | Years Completed | Diploma/Degree/<br>Certification | Course of Study |
|-------------------------------------|--------------------------|-----------------|----------------------------------|-----------------|
| High School                         |                          |                 |                                  |                 |
| Undergraduate<br>College/University |                          |                 |                                  |                 |
| Graduate/Professional<br>School     |                          |                 |                                  |                 |
| Trade/Technical<br>School           |                          |                 |                                  |                 |

Please describe any job-related specialized training, apprenticeship, skills, and extra-curricular activities:

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**EMPLOYMENT EXPERIENCE**

Please start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations indicating race, color, religion, gender, national origin, handicap, or other protected status. (Attach additional sheets if necessary)

|                     |                |
|---------------------|----------------|
| Employer:           | Supervisor:    |
| Address:            | Dates Employed |
|                     | From: To:      |
| Phone Number(s):    |                |
| Job Title:          |                |
| Job Duties:         |                |
| Reason for Leaving: |                |



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### Employment Experience

|                     |                |
|---------------------|----------------|
| Employer:           | Supervisor:    |
| Address:            | Dates Employed |
|                     | From: To:      |
| Phone Number(s):    |                |
| Job Title:          |                |
| Job Duties:         |                |
| Reason for Leaving: |                |

|                     |                |
|---------------------|----------------|
| Employer:           | Supervisor:    |
| Address:            | Dates Employed |
|                     | From: To:      |
| Phone Number(s):    |                |
| Job Title:          |                |
| Job Duties:         |                |
| Reason for Leaving: |                |

**Please explain any gaps in employment history.**

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### SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience.

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**REFERENCES**

Please do not list employers or relatives (Attach additional sheets if necessary)

| Name | Address | Daytime Phone Number | Profession |
|------|---------|----------------------|------------|
|      |         |                      |            |
|      |         |                      |            |
|      |         |                      |            |

**APPLICANT'S STATEMENT**

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand that this application, verbal statements by town employees, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. If hired, I understand that employment with the Town is considered "At Will", employment by the Town is not for a definite period, and either the employee or Town may terminate the employment relationship at any time, with or without notice or cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such changes in writing.

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 employer.

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

\_\_\_\_\_  
 Date

The Town of Wiggins does not discriminate on the basis of race, color, religion, national origin, sex, age, sexual orientation, disability, genetic information, or any other status protected by law or regulation. It is the Town's intent that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors.