



Town of Morrison  
 321 Highway 8  
 Morrison, CO 80465  
 (303) 697-8749  
[www.town.morrison.co.us](http://www.town.morrison.co.us)

**For Personnel Use Only**

## APPLICATION FOR EMPLOYMENT

**General Instructions:**

Please **TYPE** or **PRINT** all requested information.

If an item does not apply to you or you have no information to furnish, print in the letters "N/A" (Not Applicable).

A **COMPLETED** application is required. Résumés may be submitted in addition to the application.

Position Applying For: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Last City: First State: MI Zip:

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Date Available for work \_\_\_\_\_

Salary Range: \_\_\_\_\_

### GENERAL INFORMATION

- |  |   |
|--|---|
| <p>1. Do you have relatives presently working for the Town of Morrison? If yes, list in the space below the employee name and relationship.<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>       Name/Relationship: _____</p> <p>2. If you are under the age of 18, can you provide an age verification form? If you are over the age of 18, write "N/A" for "Not Applicable." _____</p> <p>3. If required by the position, do you possess a commercial driver's license? Proof of CDL and current motor vehicle record will be required.<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. If applying for a driving position, do you have a valid driver's license? (You may be asked to supply additional information at a later date.)<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>5. If applying for a position that requires a CDL, have you ever agreed to or been required to take a drug and/or alcohol test which resulted in a positive test within the past three years?<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>6. Are you able to perform the essential functions of the position for which you have applied, with or without reasonable accommodation<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>7. If required by the position, do you consent to the following: Drug Test, Polygraph, Physical Examination, Psychological Examination and Background Investigation?<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>8. If hired, will you engage in any other employment? If yes, please list positions held and approximate dates of employment in the space provided below.<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>9. Have you ever worked for the Town of Morrison before? If yes, please list positions held and approximate dates of employment in the space provided below.<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10. Not all positions in the Town involve work hours from 8 a.m. to 4:30 p.m., Monday thru Friday. Are you available and willing to work any other type of schedule required of the position?<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>11. If hired, can you furnish proof that you are eligible to work in the United States? If no, please explain in the space provided below.<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
|--|---|

**SPACE FOR DETAILED ANSWERS (Please indicate the item number to which the explanation applies. Be certain you give complete, detailed information. Use supplemental sheet, if necessary)** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**EMPLOYMENT HISTORY List all present and past employment. Applicants should provide 10 consecutive years of employment history, if applicable. Attach additional sheets if necessary. If submitting a résumé, please include all information requested on this application.**

Current/Most Recent Employer \_\_\_\_\_

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

Telephone # (\_\_\_\_) \_\_\_\_\_ Type of Business \_\_\_\_\_

Employed From: \_\_\_\_\_ (mo/yr) To: \_\_\_\_\_ (mo/yr)

Supervisor \_\_\_\_\_ Supervisor Title \_\_\_\_\_ May we contact? \_\_\_\_\_

Job Title(s) \_\_\_\_\_

Describe your major duties and responsibilities with this employer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving or wanting to leave \_\_\_\_\_

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Previous Employer \_\_\_\_\_

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

Telephone # (\_\_\_\_) \_\_\_\_\_ Type of Business \_\_\_\_\_

Employed From: \_\_\_\_\_ (mo/yr) To: \_\_\_\_\_ (mo/yr)

Supervisor \_\_\_\_\_ Supervisor Title \_\_\_\_\_ May we contact? \_\_\_\_\_

Job Title(s) \_\_\_\_\_

Describe your major duties and responsibilities with this employer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving \_\_\_\_\_

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Previous Employer \_\_\_\_\_

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

Telephone # (\_\_\_\_) \_\_\_\_\_ Type of Business \_\_\_\_\_

Employed From: \_\_\_\_\_ (mo/yr) To: \_\_\_\_\_ (mo/yr)

Supervisor \_\_\_\_\_ Supervisor Title \_\_\_\_\_ May we contact? \_\_\_\_\_

Job Title(s) \_\_\_\_\_

Describe your major duties and responsibilities with this employer: \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Use additional sheets as necessary.

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**OTHER EXPERIENCE: List any significant voluntary, military or other relevant experience that you feel further qualifies you for the position for which you are applying. Do not list organizations which would identify race, color, creed, sexual orientation, religion, age, sex, national origin or disability or other protected status.**

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**EDUCATION AND TRAINING**

High School diploma or GED?     Yes     No

**HIGHER EDUCATION**

Name & Address of College, University or Business Vocational School	Degree/Certificate	Major Field of Study	Total Credit Hours	Did you Graduate ?

**SPECIAL SKILLS OR QUALIFICATIONS -- Please place a check mark next to any skills you possess.**

- Typing/Keyboarding \_\_\_\_\_ WPM     Word Processing     PC Spreadsheets     PC Databases  
 Transcription/Dictaphone     Data Entry \_\_\_\_\_     KPH     HTML  
 Adding Machine/10-Key/By Touch    \_\_\_\_ Yes    \_\_\_\_ No     Other

Computer Software you can operate: \_\_\_\_\_

Computer Hardware you can operate: \_\_\_\_\_

List any special licenses or certificates that you possess, indicate the issuing authorities and dates of issue and operation. List any additional skills or qualifications that you possess. \_\_\_\_\_

**EQUAL OPPORTUNITY EMPLOYER**

**The Town of Morrison is an Equal Opportunity Employer. All applicants are considered for all positions for which they apply and qualify, regardless of race, color, creed, religion, sex, sexual orientation, age, national origin, or disability.**

**PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING**

**I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may justify my dismissal if discovered at a later date.**

**I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.**

**I understand that if I am extended an offer of employment, it may be conditioned upon my successfully completing any required examinations, and that, as required by the Immigration Act of 1986, I can provide identification which verifies my United States Citizenship or authorization to work or remain in the United States. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying. I understand that if I am extended an offer of employment, it will be conditional upon my agreement to Town policies.**

**I understand the Town of Morrison has adopted an "At Will" employment policy under which either the employee or the Town or Morrison may end the employment relationship with or without cause and with or without prior notice, procedure or formality. I further understand no representative of the Town or Morrison may alter this policy or enter into any employment contract with an employee about any term or condition of employment except upon the express approval of the Board of Trustees.**

**I have read, understand, and by my signature, consent to these and all statements contained within this application.**

**Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

**This application for employment may be re-activated within six (6) months.**