



**Employment Application**  
**Attn: Human Resources Department**  
 P.O. Box 1609  
 Mammoth Lakes, CA, 93546  
 (760) 965-3604  
[www.townofmammothlakes.ca.gov](http://www.townofmammothlakes.ca.gov)

Applicants will receive consideration without discrimination because of race, national origin, gender, sexual orientation, sexual identity, marital status, disability, age, religious beliefs, or veteran status.

APPLICANT INFORMATION					
Position Applied For					
First Name		Last Name			
Mailing Address					
City		State		ZIP	
Phone					
Email					
Are you legally eligible for employment in the United States?		YES <input type="checkbox"/>		NO <input type="checkbox"/>	
Are you available for full time work?		YES <input type="checkbox"/>		NO <input type="checkbox"/>	
How did you hear about this position?					

EDUCATION					
<b>Graduate School</b>		City, State			
From		To		Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Degree					
<b>College</b>		City, State			
From		To		Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Degree					
<b>High School</b>		City, State			
From		To		Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>
<b>Other Training (apprenticeship, trade, business, military, etc.)</b>					
<b>Special Skills or Licenses (languages, machine operation, special class driver's licenses etc.)</b>					

<b>EMPLOYMENT</b>					
<b>1. Company</b>			City, State		
Job Title		From		To	
Responsibilities					
Supervisor					
Reason for Leaving					
<b>2. Company</b>			City, State		
Job Title		From		To	
Responsibilities					
Supervisor					
Reason for Leaving					
<b>3. Company</b>			City, State		
Job Title		From		To	
Responsibilities					
Supervisor					
Reason for Leaving					
<b>4. Company</b>			City, State		
Job Title		From		To	
Responsibilities					
Supervisor					
Reason for Leaving					
<b>5. Company</b>			City, State		
Job Title		From		To	
Responsibilities					
Supervisor					
Reason for Leaving					

<b>DISCLAIMER AND SIGNATURE</b>		
<p>With your permission, we may contact the employers listed above to verify your employment.</p> <p>The information provided in this application for employment is true, correct, and complete to the best of my knowledge. I understand that falsification, omission, or misstatement of information may result in refusal to hire or if hired, dismissal from employment. Employers listed in this application are authorized to give any and all information concerning my previous employment.</p>		
<b>Signature</b>		<b>Date</b>