

Pelham Police Department

14 Village Green
Pelham, New Hampshire 03076
Telephone: 603-635-2411 • Fax: 603-635-6959

Application for Employment

The Town of Pelham considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status or any other legally protected status.

(PLEASE TYPE OR PRINT)

Last Name	First Name	Middle Na	me		Date of	Application	1
Address Number Street		City		Sta	te	Zip	Code
Phone Number () Area Code	Alternate Number () Area Code			ecurity Numb			
Position applied for:			D	Date available	for work:	/	_/
Best time to contact you at hon	ne?:	am / pm					
Have you ever filed an applicat	tion with us before?					Yes	□ No
If yes, give dat	te						
Have you ever been arrested or	detained by a law enforce	cement agency?	1			Yes	□ No
If yes, explain							
Do any or your friends or relati	ives, other than spouse w	ork here?				Yes	□ No
Are you currently employed?						Yes	□ No
May we contact your current en	mployer?					Yes	□ No
Are you prevented from lawful country because of Visa or Imr Proof of citizen			ired upon	employment.		Yes	□ No
How did you learn about us?	☐ Employment Agenc	y	☐ Rel	elative \square	Inquiry		
	☐ Newspaper Ad		Fri	riend 🗆	Other		

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.			

Describe any job-related training received in the United States military.					

Start with your present or last job Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates Employed From To		Work Performed
Address				
Telephone Number(s)		Hourly Ra Starting	te/Salary Final	
Job title	Supervisor			
Reason for Leaving				
Employer		Dates En From	nployed To	Work Performed
Address				
Telephone Number(s)		Hourly Ra Starting	te/Salary Final	
Job title	Supervisor			
Reason for Leaving				
Employer		Dates En From	nployed To	Work Performed
Address				
Telephone Number(s)		Hourly Ra Starting	te/Salary Final	
Job title	Supervisor			
Reason for Leaving				
Employer		Dates En From	nployed To -	Work Performed
Address				
Telephone Number(s)		Hourly Ra Starting	te/Salary Final	
Job title	Supervisor			
Reason for Leaving				
]	If you need additional space co	ntinue on a	separate sh	neet of paper.
List professional, trade, business or civic, activities and offices held. You may exclude membership, which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status				

Other Qualifications Summarize Special job-related skills and qualifications acquired from en	aployment or other experience.	
Specialized Skills (Check Skills/Equipment Operated.)	Job Related equipment	
☐ PC/MAC ☐ Typewriter		
☐ Word Processor		
Cities and additional information you feel may be helpful to us in	aidanina	
State any additional information you feel may be helpful to us in c your application.	?onsiaering	
Note to Applicants: DO NOT ANSWER THIS QUESTION UN REQUIREMENTS OF THE JOB FOR WHICH YOU ARE A		MED ABOUT THE
Are you capable of performing in a reasonable manner, with or we job or occupation for which you have applied? A review of the ac		
	☐ YES	□ NO
References		
Name	Phone	
Address	()	
Name	Phone (
Address		
Name	Phone	
	/	

I certify that answers given herein are true and complete.					
I authorize investigation of all statements contained in this application fo necessary in arriving at an employment decision.	r employment as may be				
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 nquire as to whether or not applications are being accepted at that time.					
I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. 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				
FOR PERSONNEL DEPARTMENT USE	EONLY				

FOR PERSONNEL DEPARTMENT USE ONLY				
Arrange Interview	☐ Yes	□ No		
Remarks				
			Interviewer Date	
Employed	☐ Yes	☐ No Date of Employment		
Job Title		Hourly RateDepartment		
	Ву			
		Name and Title	Date	

Pelham Police Department

We are an equal opportunity employer.