## Town of Terry 315 Cunningham Avenue Terry, MS 39170 601-878-5521

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information										
Name										
Address				City		State		Zip		
Phone Number Mobile		Number	Email Address							
Are You A U.S. Citizen? Yes \( \scale= \) No \( \scale= \)				Have You Ever Been Convicted Of A Felony?  Yes □ No □						
If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test and Criminal Background Check?  Yes \[ \] No \[ \]										
Position										
Position You Are Applying For				Available Start Date				Desired Pay		
Employment Desired				☐ Part Time ☐ Seasonal/Temporary						
Shift Availability										
From	Mono	lay	Tuesday	Wednesday	Thursday	/	Friday	Sa	aturday	Sunday
From To										
Overnight										
Education										
Schoo	School Name		Location	Years Attended		Degree Received		Major		
References										
Name		ne		Title		Company		Phone		

Employment History								
Employer (1)	Job Title	Dates Employed						
Work Phone	Starting Pay Rate	Ending Pay Rate						
Address	City	State	Zip					
Employer (2)	Job Title	Dates Employed						
Work Phone	Starting Pay Rate	Ending Pay Rate						
Address	City	State	Zip					
Employer (3)	Job Title	Dates Employed						
Work Phone	Starting Pay Rate	Ending Pay Rate						
Address	City	State	Zip					
Summarize any special training, skills, licenses and/ or certificates that may assist you in performing the position of which you are applying.								
Signature Disclaimer								
I certify that my answers are true and complete to the best of my knowledge.  If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.								
Name (Please Print)	Signature							
Date								