

# ISLAND IRRIGATION

508-228-2745

## Application for Employment

Date \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Permanent Address \_\_\_\_\_  
\_\_\_\_\_

On-Island Address \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Social Security# \_\_\_\_\_ Birth Date \_\_\_\_\_

Valid Driver's License? YES / NO

Are you either a U.S. Citizen or an Alien authorized to work in the United States? YES / NO

Have you ever had your drivers license suspended or revoked? YES / NO

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

### EDUCATION

High School \_\_\_\_\_ Did you graduate? YES / NO

College \_\_\_\_\_ Major \_\_\_\_\_ Did you graduate? YES / NO

Trade Business or Correspondence School: \_\_\_\_\_

### FORMER EMPLOYER (List last three employers)

Name \_\_\_\_\_

Dates of Employment \_\_\_\_\_ Salary \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name \_\_\_\_\_

Dates of Employment \_\_\_\_\_ Salary \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name \_\_\_\_\_

Dates of Employment \_\_\_\_\_ Salary \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**REFERENCES** (List three references)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

**OTHER**

Dates Available: Start \_\_\_\_\_ End \_\_\_\_\_

Will you require housing? YES / NO

I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand, that if employed, falsified statements in this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.

Name \_\_\_\_\_ Date \_\_\_\_\_

**ISLAND IRRIGATION**

PO Box 3027  
Nantucket, MA 02584