



**TOWN OF TOWNSEND
EMPLOYMENT APPLICATION**



PLEASE READ BEFORE COMPLETING THIS APPLICATION:

The TOWN OF TOWNSEND does not discriminate in the selection, hiring, appointment or employment of any individual on the basis of race, color, religious creed, national origin, disability, gender identification, veteran status, ethnicity, appearance, or age. No question on this application is intended to secure information to be used for such discrimination.

To be sure that your application is properly evaluated, all questions should be answered clearly, completely and accurately. If you need more space, feel free to attach a separate sheet, labeled with your name on top. Thank you.

PERSONAL

Date: _____ Date of Birth: _____

Name: _____
Last First MI

Telephone: (_____) _____ - _____ Personal Email: _____

Residential Address:

No. # Street Unit # City State Zip Code

Mailing Address (if different):

No. # Street Unit # City State Zip Code

Social Security Number: _____ I prefer to provide this information later

Position(s) desired: _____

Hours/salary desired: _____ Date available: _____

GENERAL INFORMATION

How were you referred to us (please select all that apply)?

() Newspaper(s) / Other Print Publication(s): _____

() Website(s) / Online Job Bank(s) / Social Media Site(s): _____

() Employee Referral: _____ Other: _____

() School/College: _____ Special Work Program: _____

Have you filed an application here before? No Yes - date(s)/position(s): _____

Have you ever been employed here before? No Yes - start/end date(s): _____

If you are under 18, can you furnish a work permit? No Yes Not yet, but I'll get one

Are you employed now? No Yes

EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin.

Name of Employer:	Dates Employed: From: _____ To: _____	Job Title and Work Performed:
Address of Employer: _____ _____ _____		
Phone #:		
Reason for Leaving:		

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Phone #:		
Reason for Leaving:		

If you need additional space, please continue on a separate sheet of paper.

May we contact your present employer?

(Immediately (After Acceptance of Employment No

If no, specify reason: _____

Describe other training, certifications, licenses (CDL, etc.) or experience applicable to the job you are seeking:

EDUCATION

Name of High School _____		Number of years completed 1 2 3 4			
Complete address _____		Area(s) of interest: _____			
Dates attended	From: _____ To: _____	Graduated Yes No		Designated club(s)/team(s), etc: _____	
Name of College _____		Number of years completed 1 2 3 4			
Complete address _____		Major course(s) of study: _____			
Dates attended	From: _____ To: _____	Graduated Yes No		Degree(s) and/or Certificate(s) earned: _____	
Name of Other Training Program/Institute _____		Number of courses/programs/units/etc. completed _____			
Complete address _____		Description of course(s)/program(s) completed: _____			
Dates attended	From: _____ To: _____	Graduated Yes No		Degree(s) and/or Certificate(s) received: _____	
OTHER (and/or additional comments regarding education/training): _____					

Awards, honors, scholarships, etc.:

Do you intend to continue your education? If yes, please elaborate:

REFERENCES:

Please supply three professional or work-related references for the Town to contact:

Name of Reference	Company	Their Title	Years Acquainted
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

AGREEMENT - Please Read Before Signing

NOTE:

If you have any questions regarding the following statement, please ask a Personnel Representative before signing.

I understand that receipt of this application and the granting of an interview does not imply that I will be employed.

I hereby affirm that the information provided by me on this application (and accompanying resume, if any) is true and complete and I understand that any false information or material omission of fact may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date. I understand that any offer of employment is conditioned upon satisfactory replies from my references and that employment is for no stated term and may be terminated by me or the Town at any time.

I authorize persons, schools, current employer (if applicable) and previous employers and organizations named in this application (and accompanying resume, if any) to provide the Town with any relevant information which may be required to arrive at an employment decision and I voluntarily release such persons, schools, employers and organizations from all liability for providing such information. I release the Town against any liability which might result from requesting such information.

Signature: _____ Date: _____

An original wet signature is required by the Town of Townsend to apply for employment.

Completing this Employment Application does not constitute an offer of employment agreement between the employer and the employee.

It is unlawful in the State of Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

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