

Town of Chesterfield, Massachusetts

Application for Employment

(Not for use in applying for Police Dept. Positions)

Instructions: Complete all sections (even if using a resume). Be sure to sign/date. Please print.

How did you hear of the position? _____ad ____posting _____friend/relative _____other

Position being applied for:

Personal Information

Name:
Address:
Telephone Number:
If hired, can you provide proof of citizenship or legal right to work?yesno
Are you under 18 years of age?yesno If yes, how old are you?
Have you ever been employed by the Town before?yesno
If yes, when? In what department?
Are you available to work?full timepart timeother
If you were hired, when could you begin work?

Education				
Name/Location	Course of Study	<u>Graduate</u>	Degree	
High School:		Yes or No		
College:				
Graduate School:				
Giudude Senson.				
Other (Business Technical, etc.):				

Employment History

Employer's name:	
AddressTelephone:	_
Job Title: Worked from:to	_
Immediate Supervisor's name and title:	_
Describe the work you performed:	_
Reason for leaving:	_
Check here if you do NOT want us to contact this employer	
Employer's name:	
AddressTelephone:	_
Job Title: Worked from:to	_
Immediate Supervisor's name and title:	_
Describe the work you performed:	_
Reason for leaving:	_
Check here if you do NOT want us to contact this employer	
Employer's name:	
AddressTelephone:	-
Job Title: Worked from:to	-
Immediate Supervisor's name and title:	_
Describe the work you performed:	_
Reason for leaving:	

Check here if you do NOT want us to contact this employer _____

Employer's name:		
Address	Telephone:	
Job Title:	Worked from:to	
Immediate Supervisor's name and title:		
Describe the work you performed:		
Reason for leaving:		
Check here if you do NOT want us to contact the	his employer	

Special Skills or Related Work Experience

Describe any specialized training or job related skills that you have that will help us evaluate your application for Employment:

Military History				
Are you a veteran of the U.S. Armed Forces:	YesNo If yes, please complete this section:			
Do you qualify as a "Wartime Veteran"?	_YesNo			
Branch:	Rank at Discharge:			
Discharge Status:	Present Military Status:			
Dates of Service: Fromto				

Additional Information

To the Applicant: Answer the following question only if you have seen a copy of the position's job description, including the essential functions or the position. Federal laws prohibit discrimination because of age, citizenship, disability, veteran's status, religion, genetic information or participation in union activities.

After viewing a written job description, which includes the essential job functions of the position for which you are applying, are you able to perform each of the essential job functions listed for this position?

Professional References: (Do not include friends or family members)		
Name:	Phone:	
Address:	_Relationship:	
Name:	_Phone:	
Address:	_Relationship:	
Name:	Phone:	
Address:	Relationship:	
Emergency Contact: Name:	Phone:	

Agreement

The information provided in this application for employment is true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I must be available from time to time to work outside normal business hours as the needs of the department require. Further, if requested, I agree to take a physical examination, which may include testing for drugs or a psychological examination, as required, and recognize that any offer of employment may be contingent upon the results of such an examination. I understand that any employment offer by the Town is conditional upon my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986.

I understand that nothing contained in this application or in the granting of an interview is intended to create a contract between me and the Town for either employment or the provision of any benefits; and further understand that if an employment relationship is subsequently established, I will have the right to terminate my employment at any time and the Town will have a similar right.

I authorize investigation of all statements contained in this application and the release of any pertinent information regarding my education, past employment history, and background.

Signature:

Date:

It is unlawful in 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.

Do not write below this line

Date:	Interviewer:	
	Comments	
		_
		_
		_