

# APPLICATION FOR EMPLOYMENT

## TOWN OF MEDWAY

155 Village Street

Medway, MA 02053

508-533-3294

fax 508-321-4940



*The Town of MEDWAY is an Affirmative Action/Equal Employment Opportunity Employer*

*All information must be typed or printed. Any unreadable applications will be discarded.*

### PERSONAL INFORMATION

Date of application: \_\_\_\_\_

Position Applying for: \_\_\_\_\_

1. Name:

\_\_\_\_\_

*Last*

*First*

*Middle*

2. Address:

\_\_\_\_\_

*Street*

*Apartment Number*

\_\_\_\_\_

*City/Town*

*State*

*Zip Code*

3. Email address: \_\_\_\_\_

4. Telephone number: Home \_\_\_\_\_ Cell \_\_\_\_\_

5. I will accept: full time \_\_\_\_\_ Part-time \_\_\_\_\_

6. If hired, can you provide proof of citizenship or legal right to work?  Yes  No

7. Are you under 18 years of age? Can you provide required documentation to work?  
 Yes  No

8. Have you ever been employed by the Town before?  Yes  No  
If yes, when: \_\_\_\_\_ which department? \_\_\_\_\_

9. Are you a Veteran? \_\_\_\_\_

10. Are you related to anyone employed by the Town of Medway? Give name and department  
(The purpose of this question is to avoid a "conflict of interest" M.G.L. c.268A).

\_\_\_\_\_

11. Date available: \_\_\_\_\_ Expected salary range: \_\_\_\_\_

12. How were you referred to the Town? \_\_\_\_\_

## EDUCATION

Name/Location	Course of Study	Years Completed	Did you graduate?	Degree
High School				
College				
Graduate School				
Technical School				

**CERTIFICATION: Many positions require certification. Please list below any certifications that you may have obtained.**

Type	Level	Date
1. _____		
2. _____		
3. _____		
4. _____		

**Do have any of the following special training or licenses? Please list in detail all that may apply.**

Class B Commercial Driver's License: \_\_\_\_\_

Hoisting Engineer's License: \_\_\_\_\_

Professional Licenses: \_\_\_\_\_

Professional Memberships: \_\_\_\_\_

Additional Training /Courses: \_\_\_\_\_

Computer Software: \_\_\_\_\_

Office Equipment: \_\_\_\_\_

## EMPLOYMENT HISTORY

1. Employer's Name \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked from: \_\_\_\_\_ to: \_\_\_\_\_

Immediate Supervisor's Name and Job Title \_\_\_\_\_

Salary: \_\_\_\_\_ / \_\_\_\_\_ May we contact this employer? Yes  No   
*Starting* *Ending*

Describe the work you perform: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

2. Employer's Name \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked from: \_\_\_\_\_ to: \_\_\_\_\_

Immediate Supervisor's Name and Job Title: \_\_\_\_\_

Salary: \_\_\_\_\_ / \_\_\_\_\_ May we contact this employer? Yes  No   
*Starting* *Ending*

Describe the work you performed: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

3. Employer's Name \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked from: \_\_\_\_\_ to: \_\_\_\_\_

Immediate Supervisor's Name and Job Title: \_\_\_\_\_

Salary: \_\_\_\_\_ / \_\_\_\_\_ May we contact this employer? Yes  No   
*Starting* *Ending*

Describe the work you performed: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

## REFERENCES

**Please provide professional references.** Note that references listed in this section may be contacted.

### Reference #1

Name/Relationship: \_\_\_\_\_ Firm: \_\_\_\_\_

Telephone: Daytime \_\_\_\_\_ Work \_\_\_\_\_

Email address (if available): \_\_\_\_\_

### Reference #2

Name/Relationship: \_\_\_\_\_ Firm: \_\_\_\_\_

Telephone: Daytime \_\_\_\_\_ Work \_\_\_\_\_

Email address (if available): \_\_\_\_\_

### Reference #3

Name/Relationship: \_\_\_\_\_ Firm: \_\_\_\_\_

Telephone: Daytime \_\_\_\_\_ Work \_\_\_\_\_

Email address (if available): \_\_\_\_\_

## 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 authorize investigation of all statements contained in this application and the release of any pertinent information regarding my education, past employment history and background. I authorize the Town of Medway to obtain any information from schools, employers or individuals relating to my activities. This information may include, but is not limited to: academics, achievement, performance, attendance, personal history and discipline. Further, I hereby authorize all references, persons, schools, my current employer (if applicable) and previous employers and organizations named in this application, unless otherwise stated, to provide the Town of Medway any relevant information that may be required to arrive at an employment decision. I understand that the information released is for the Town of Medway's use only.

I hereby voluntarily release, discharge and exonerate the Town of Medway, its agents and representatives, and any person so furnishing information from any and all liabilities of every nature and kind arising out of the furnishing or inspection of such documents, records and other information or the investigations made by or on behalf of the Town of Medway.

I understand that all appointments are probationary and that I must demonstrate my ability for continued employment. 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.

If required for the position I am seeking, I agree to take a physical examination, which may include testing for drugs or a psychological examination as required. I recognize that any offer of employment is contingent upon the satisfactory results of such an examination. Financial back-round checks and the ability to be bonded may be required for candidates seeking some financial positions, and any offer of employment is contingent upon satisfactory results.

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 within three days of the date of hire.

I represent that I have read and fully understand the foregoing and seek employment under these conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**“Discrimination against any person in any practice or procedure in advertising, recruitment, referrals, testing, hiring, transfer, promotion or any other term, condition or privilege of employment which limits or adversely affects employment opportunities, because of political or religious opinions or affiliations, or because of race, color, sex, sexual orientation, national origin, marital status, pregnancy, parenthood, age or handicap which is unrelated to the person's occupational qualifications or any other non-merit factor which is not a bona fide occupational qualification is prohibited.”**

**It is unlawful in Massachusetts to require a lie detector test as a condition of employment or continued employment. An employer who violates that law shall be subject to criminal penalties and civil liabilities.**

## **Town of Medway Release**

I \_\_\_\_\_ a candidate for the position of \_\_\_\_\_ hereby authorize the Town of Medway to investigate all statements in my application and to secure any necessary information from all my employers, references, and academic institutions. I hereby release all of those employers, references, academic institutions, and the Town of Medway from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the Town of Medway.

I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials and employment references. I further understand that any false or misleading statements will be sufficient cause for rejection of my application if the Town of Medway has not yet employed me and for immediate dismissal if the Town of Medway has employed me. I also authorize the Town to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having legal and proper interest, and I hereby release the Town of Medway from any and all liability for its providing this information.

In the event of my employment with the Town of Medway, I will comply with all rules, regulations, and policies set forth in the Town of Medway's Charter or other communications distributed by the Town of Medway.

I understand that nothing in this employment application, in the Town of Medway's policy statements, personnel guidelines, or in my communications with any Town of Medway official is intended to create an employment contract between the Town of Medway and me. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon the Town of Medway unless it is made in writing and signed by a Town of Medway official.

I hereby acknowledge that I have read and understand the preceding statement.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# Voluntary Affirmative Action Request Form

The town of Medway as part of its commitment to Affirmative Action/Equal Opportunity policies invites you to provide the following information. All applicants will be considered without regard to race, color, religion, gender, national origin, age, marital or veteran status, medical condition or disability. The information is voluntary and refusal to provide it will not have any bearing on our employment decision. The data is confidential and will be filed separately. It will be available only to authorized personnel and is used to further the Town's Affirmative Action/Equal Opportunity policies. Your cooperation is appreciated.

Position Title: \_\_\_\_\_

Gender:        Male                          Female   

Ethnic Origin:

- White – All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.
  
- Black – All persons having origins in any of the black racial groups of Africa.
  
- Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin regardless of race.
  
- Asian or Pacific Islander – All persons having origins in any of the peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.
  
- American Indian or Alaskan Native – All persons having origins in any of the original people of North America maintaining cultural identification through tribal affiliations or community recognition.
  
- Cape Verdean – All persons having origins on the Cape Verde Islands.

National Origin: \_\_\_\_\_

Veteran Status                       YES                      NO   

Vietnam Era, 1962 – 1975     YES                      NO   

Disabled:                               YES                      NO