

TOWN OF SOUTHBOROUGH

APPLICATION FOR EMPLOYMENT

PLEASE READ BEFORE FILLING OUT THIS APPLICATION:

The Town of Southborough (the "Town") is an Equal Opportunity Employer. The Town does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, ancestry or sexual orientation or on the basis of age, as defined by law, or disability. No question on this application is intended to secure information to be used for such discrimination. This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

In processing this employment application, the Town may request that an investigative consumer report be prepared, which may include information as to your character, general reputation, and personal characteristics, obtained through personal interviews with neighbors, friends, and associates. In addition, information may be obtained from former employers and educational institutions that you have attended. A credit bureau report may also be obtained as part of this application and later for purposes of promotion, reassignment or retention.

I understand that should such investigation reveal any false statements made by me or other derogatory information, I may be disqualified from employment or subsequently dismissed. You have the right to request that the reporting agency provide you with the details of the report.

I further understand that, if I am hired, subsequent consumer reports may be requested without additional notice to me, in connection with the continuation of my employment (subject to collective bargaining requirements).

I hereby acknowledge that I have read the foregoing disclosure and understand it. I authorize the Town to conduct whatever investigation it deems necessary.

Signature: _____

Date: _____

PLEASE ANSWER EVERY QUESTION

(PRINT)

(FIRST)	(MIDDLE)	(LAST)	(DATE)
(NUMBER)	(STREET)	(TELEPHONE NUMBER)	
(CITY)	(STATE)	(ZIP CODE)	(LENGTH OF TIME AT THIS ADDRESS)

List previous addresses within the United States, except Military, if address changed during the past 5 years.

(NO.)	(STREET)	(CITY)	(STATE)	FROM (DATE)	TO
(NO.)	(STREET)	(CITY)	(STATE)	FROM (DATE)	TO

From here on, please **WRITE** in your **NORMAL HANDWRITING**.

In case of emergency, notify:

(NAME)	(ADDRESS)	(PHONE)
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EMPLOYMENT DESIRED

Position _____

How were you referred to us? _____ Date available for work _____

Are you a United States Citizen or otherwise eligible for employment in the United States? Yes No

I understand that any offer of employment is conditioned upon the satisfactory completion of the verification process as required by the Immigration Reform and Control Act of 1986, and that the Town will hire only those individuals who are legally authorized to work in the United States and who present acceptable proof of their lawful employment status and identity.

EMPLOYMENT HISTORY*

Include summer and part-time work, and any periods of unemployment. You may include in your work history verified work performed on a volunteer basis. List only employment within the United States.

List Below the Name and Business Address of All Your Former Employers Beginning With Your Last Position	Time Employed From Mo/Yr To Mo/Yr	Nature of Work	Reason for Leaving	Name of Immediate Supervisor
1.				
2.				
3.				
4.				
5.				

May we contact the employers listed above? _____ If not, indicate by number which ones you do not wish us to contact. _____

Were you ever dismissed from a job? _____ If yes, give details _____

* Attach additional sheets if necessary.

EDUCATION*

Type of School	Name of School	City/State	Course Majored in	Number of Years Completed	Graduate? Give Degree
Elementary					
High School					
College					
Graduate					
Other (Trade, Corres., Night)					

*Do not answer if not relevant to the requirements of the position for which you are applying.

PLEASE READ CAREFULLY BEFORE SIGNING. If you have any questions regarding this statement, please ask them before signing.

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 liabilities.

In the event of employment to a position with the Town, I will comply with all the rules and regulations as set forth in the Town's policies, by-laws, or other communications distributed to all employees, which may be changed without notice at the discretion of the Town. Additionally, I authorize the Town to supply my employment records in whole or in part, and in confidence, to any prospective employer, government agency, or other party.

I hereby authorize my present and/or former employers, educational institutions, credit bureaus, references, neighbors and friends to disclose to the Town any and all information concerning my previous employment and any other pertinent information they may have, personal or otherwise, and I release all parties from any liability whatsoever resulting from such disclosure.

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably.

I understand and agree that if I am offered employment, it will be as an employee-at-will and that no employment contract rights have been created. (This statement does not necessarily apply to those employees who, if hired, will be members of a collective bargaining agreement.) I also understand and agree that my employment may be terminated at any time with or without cause (subject to the collective bargaining agreement, if applicable) and with or without advance notice at the option of either the Town or myself. I also understand that no supervisor, manager or other representative of the Town has any authority to enter into any express or implied contract for employment for any specific period of time. Any agreement contrary to the above must be in writing and must expressly state that it is a contract and be signed by the Appointing Authority for my position within the Town.

I hereby acknowledge that I have read the above statement and understand it.

Signature of Applicant

Date

Please read the paragraph below and then answer the questions which follow.

I CERTIFY THAT ALL ANSWERS GIVEN AND STATEMENTS MADE BY ME ON THIS QUESTIONNAIRE/APPLICATION ARE TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND I UNDERSTAND THAT ANY FALSE OR MISLEADING ANSWERS OR ANY OMISSION OR CONCEALMENT OF FACTS WILL DISQUALIFY ME FROM CONSIDERATION FOR EMPLOYMENT OR MAY RESULT IN MY IMMEDIATE DISCHARGE.

BY SIGNING MY NAME TO THIS APPLICATION, I CERTIFY THAT THERE ARE NO CONDITIONS WHICH PREVENT ME FROM PERFORMING THE ESSENTIAL FUNCTIONS REQUIRED OF THIS JOB, INCLUDING BUT NOT LIMITED TO ANY MEDICAL OR OTHER CONDITIONS.

I hereby acknowledge that I have read the above statement and understand the same.

Signature of Applicant

Date