GALE LIBRARY BUILDING

TOWN OF NORTHBOROUGH, MASS.

63 Main Street, Northborough, MA 01532

Application for Employment

(please print or type)

The Town of Northborough recognizes the right of an individual to work and to advance on the basis of merit, ability and potential without regard to race, sex, color, mental or physical limitation, religious creed, national origin or ancestry, age, veteran status, sexual orientation, marital status or maiden name, or political affiliation. NOTE: The Town accepts applications for advertised positions only. INSTRUCTIONS: Each question below should be fully and accurately answered. If you will require special accommodation in order to apply for this position, please notify the Town Administrator's Office prior to the deadline for submitting applications.

PERSONAL INFORMA	ATION						
Full Name (first, midd	le, last):						
Address (street/city/s	state/zip):						
Position Applied for:	Position Applied for: Date of Application:						
Phone Number:							
Email Address:							
Have you ever been employed by the Town of Northborough? NO YES							
If YES, Title of Posi	tion Held:		Departme	ent:			
Dates of Employme	ent: From	/	/ To/	/			
Reason for Leaving							
List any relatives wh	List any relatives who currently work for the Town of Northborough:						
Relative's Name		Department			Relationship		
If you are under 18 yea	ars of age, can yo	u prov	ide required proof of y	our elig	ibility to work?	NO YES	
Are you a citizen of the	e United States?	NO	YES				
If NO, can you prov			eligible to work in the U NO YES	Jnited S	tates, in accorda	ance with	
EDUCATION							
Circle the highest grade completed: 5 6 7 8 9 10 11 12 College: 1 2 3 4 5 6 6+							
	School (name, city, st	ate)	Diploma/Degree	Date	es Attended	Major/ Course of Study	
High School/GED							
Undergraduate							
College/University							
Graduate College/University							
Other Education, i.e.							
Technical, Business							

EMPLOYMENT HISTORY (Please list your most recent employer first, a	and account for any gaps in employment.)
Company:	
Full Address:	
Your Title:	
Employed From:	Employed To:
Responsibilities:	
Supervisor's Name:	Phone Number:
Reason for Leaving:	
May we contact your present employer? NO	YES
Company:	
Full Address:	
Your Title:	
Employed From:	Employed To:
Responsibilities	
Supervisor's Name:	Phone Number: ()
Reason for Leaving:	
Company:	
Full Address:	
Your Title:	
Employed From:	Employed To:
Responsibilities:	
Supervisor's Name:	Phone Number: ()
Reason for Leaving:	()

IF NEEDED, PLEASE ATTACH ADDITIONAL SHEETS TO INCLUDE ADDITIONAL EMPLOYMENT HISTORY.

MILITARY SERVICE	CE				
Have you ever served	in the U.S. Armed Forces?	YES NO			
If YES, what branch	1?				
Type of Discharge:		Date of Discharge:	Date of Discharge:		
Describe any traini	ing which would be releva	nt to the position for which y	ou are applying:		
SPECIFIC SKILLS					
List technical/professi	ional licenses or certificati	ons you hold:			
List office machines, h	eavy equipment, vehicles a	and other machinery you can	operate:		
Indicate any specialize	ed training you have receiv	ved:			
DRIVER'S LICENS	ES otor vehicle operator lice	enses you hold:			
License #	Issuing State	Expiration Date	License Type		
REFERENCES List three (3) person	al references who are no	ot former employers or rela	ted to you:		
Name	Address	Phone Number	Relationship		
PL	EASE ATTACH ADDIT	rional sheets if nec	ESSARY		

MISCELLANEOUS ADDITIONAL INFORMATION
Have you ever applied for a position with the Town before? YES NO
If YES, give date and position:
Use this space for any further information you think would help us evaluate your application:
CERTIFICATION AND AGREEMENT
PLEASE READ CAREFULLY BEFORE SIGNING
I CERTIFY that all entries on this application for employment, and attachments, are true and complete, and, that I understand that any falsification of information herein, material half-truths, misstatements or omissions, regardless of their time of discovery, may cause forfeiture on my part to any employment with the Town of Northborough. I understand that all information on this application is subject to verification and I consent to the contacting of references, former employers and educational institutions regarding this application.
I AUTHORIZE the Town of Northborough to obtain any information from schools, employers, or individuals relating to my activities. This information may include, but is not limited to: academic, achievement, performance, attendance, personal history, disciplinary. Further, I hereby authorize all references, persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and accompanying resume or other documents supplied by me) to provide the Town of Northborough any relevant information that may be required to arrive at an employment decision. I understand that the information release is for the Town of Northborough's use only.
I RELEASE any individual, including record custodians, from any and all liability for damages of whatever kind or nature which may, at any time, happen to me as a result of compliance and/or attempts to comply with this authorization.
Applicant's Signature Date

THE TOWN OF NORTHBOROUGH IS AN AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER