



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 INFORMATION				
Full Name (first, middle, last):				
Address (street/city/state/zip):				
Position Applied for: Date of Application:				
Phone Number:				
Email Address:				
Have you ever been employed by theTown of Northborough? NO YES				
If YES, Title of Position Held: Department:				
Dates of Employment: From To				
Reason for Leaving:				
List any relatives who currently work for the Town of Northborough:				
Relative's Name	Department	Relationship		
If you are under 18 years of age, can you provide required proof of your eligibility to work? NO YES				
Are you a citizen of the United States? NO YES				
If NO, can you provide proof that you are eligible to work in the United States, in accordance with the Immigration Reform and Control Act? NO YES				
EDUCATION				
Fill out the highest grade completed: 5 6 7 8 9 10 11 12 College: 1 2 3 4 5 6 6+				
	School (name, city, state)	Diploma/Degree	Dates Attended	Major/ Course of Study
High School/GED				
Undergraduate				

College/University				
Graduate College/University				
Other Education, i.e. Technical, Business				

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EMPLOYMENT HISTORY (Please list your most recent employer first, 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
Have you ever served in the U.S.Armed Forces? YES NO
If YES, what branch?
Type of Discharge: Date of Discharge:
Describe any training which would be relevant to the position for which you are applying:

SPECIFIC SKILLS
List technical/professional licenses or certifications you hold:
List office machines, heavy equipment, vehicles and other machinery you can operate:
Indicate any specialized training you have received:

DRIVER'S LICENSES			
List all unexpired motor vehicle operator licenses you hold:			
License #	Issuing State	Expiration Date	License Type

REFERENCES

List three (3) personal references who are not former employers or related to you:

Name	Address	Phone Number	Relationship

PLEASE ATTACH ADDITIONAL SHEETS IF NECESSARY

MISCELLANEOUS ADDITIONAL INFORMATION

Have you ever applied for a position with theTown 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

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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**