

Town of Rehoboth

Application for Employment

The Town of Rehoboth is an Equal Opportunity Employer. We consider applicants for all positions without regard to age, race, color, religious creed, national origin, gender, sexual orientation, handicap/disability, genetic information, status as a veteran, or any other legally protected status pursuant to Massachusetts Fair Employment Practices Act, and other relevant federal, state and local laws.

(PLEASE PRINT)

Position(s) Applied for:		Date:	
How Did You Learn About The Position?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-in	
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	
Last Name:	First Name:	Middle Name:	
Address:	<i>Number:</i>	<i>Street:</i>	<i>City:</i> <i>State:</i> <i>Zip Code:</i>
Home Phone: () _____		Cell Phone: () _____	
E-mail:			

Please answer the following questions:

If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever filed an application with us before? If yes, give date: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed with us before? If yes, give date: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>Proof of citizenship or immigration status will be required upon employment</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
On what date would you be available for work: _____	
Are you available to work: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Shift Work <input type="checkbox"/> Temporary	
Are you currently on "layoff" status and subject to recall?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you travel if a job requires it?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Education:

	Name and Address of School	Course of Study	Number of Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate or Professional				
Other if Relevant				

Describe any relevant specialized training, apprenticeships, skills, and extra-curricular activities:

Describe any job-related training received in the United States military:

Employment Experience:

Start with your present or last job. Include any job-related military service assignments and volunteer activities. *You may exclude organizations which indicate race, color, religion, gender national origin, disabilities or other protected status.*

1.	Employer:	Dates Employed		Work Performed
	Address:	From	To	
	Telephone Number(s):			
	Job Title:			
	Supervisor:			
	Reason for leaving:			

2.	Employer:	Dates Employed		Work Performed
	Address:	From	To	
	Telephone Number(s):			
	Job Title:			
	Supervisor:			
	Reason for leaving:			
3.	Employer:	Dates Employed		Work Performed
	Address:	From	To	
	Telephone Number(s):			
	Job Title:			
	Supervisor:			
	Reason for leaving:			
4.	Employer:	Dates Employed		Work Performed
	Address:	From	To	
	Telephone Number(s):			
	Job Title:			
	Supervisor:			
	Reason for leaving:			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held: *You may exclude organizations which indicate race, color, religion, gender national origin, disabilities or other protected status.*

Additional Information:

Other Qualifications:

Summarize special job-related skills and qualifications including office software, machinery or other equipment operated:

State any additional information you feel may be helpful to us in considering your application:

References:

1.	Name: _____ Phone: () _____ - _____ Address: _____
2.	Name: _____ Phone: () _____ - _____ Address: _____
3.	Name: _____ Phone: () _____ - _____ Address: _____

Applicant's Statement:

I certify that answers given herein are true and complete to the best of my knowledge. I understand that if employed, any misrepresentation or false or misleading statements given in this application, resume, or in personal interviews may be sufficient grounds for discharge.

I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

I understand that all appointments are probationary and that I must demonstrate my fitness for continued employment. I also understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that I may resign at any time for any reason and that the Town of Rehoboth reserves the right to terminate my employment at any time with or without cause. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant:

Sign Name: _____

Date: _____