

# APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legal protected status.

(PLEASE PRINT)

Date of Application		Position Applied For		
Last Name	First Name		Middle Name	
Address Number Street		City or Town	State	Zip
Telephone Numbers		Email		

## SECTION I: PERSONAL INFORMATION

If you are under 18 years of age, can you provide required proof of your eligibility to work?

☐ Yes ☐ No

Have you ever filed an application with us before?

☐ Yes ☐ No

If yes, give date and position applied for \_\_\_\_\_

Have you ever been employed by the Town of Norton before?

☐ Yes ☐ No

If yes, give date(s) and list the municipal/school department(s)

Are you currently employed?

☐ Yes ☐ No

May we contact your current employer?

☐ Yes ☐ No

Are you legally authorized to work in the United States?

*Proof of citizenship or immigration status will be required upon employment.*

On what date would you be available for work? \_\_\_\_\_

Are you available for work: ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary

Are you currently on "lay-off" status and subject to recall?

☐ Yes ☐ No

Do you possess a valid Mass. Driver's License?

☐ Yes ☐ No

Can you travel if the job requires it?

☐ Yes ☐ No

## SECTION II: EDUCATION

	Name and Address Of School	Course of Study	Number of Years Completed	Diploma Degree
High School				
Vocational, Technical, or Correspondence				
College/University				
Graduate/ Professional				
Other (Specify)				
Describe any Specialized Training, Apprenticeship License, Foreign Language Skills, Other Skills, and Extra-Curricular Activities:				

## SECTION III: COMPUTER SKILLS

SKILL	PROGRAM	BEGINNER	INTERMEDIATE LEVEL	ADVANCED LEVEL
Word Processing				
Spreadsheets				
Databases				
Bookkeeping				
Accounting Systems				
Typing/Keyboard				
Other:				
Other:				

## SECTION IV: EMPLOYMENT HISTORY

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.

<b>Employer</b>		Dates Employed From                  To	Describe Work You Performed
Address		May We Contact This Employer?	
Telephone Numbers			
Job Title	Immediate Supervisor's Name and Job Title		Reason for Leaving
<b>Employer</b>		Dates Employed From                  To	Describe Work You Performed
Address		May We Contact This Employer?	
Telephone Numbers			
Job Title	Immediate Supervisor's Name and Job Title		Reason for Leaving
<b>Employer</b>		Dates Employed From                  To	Describe Work You Performed
Address		May We Contact This Employer?	
Telephone Numbers			
Job Title	Immediate Supervisor's Name and Job Title		Reason for Leaving
<b>Employer</b>		Dates Employed From                  To	Describe Work You Performed
Address		May We Contact This Employer?	
Telephone Numbers			
Job Title	Immediate Supervisor's Name and Job Title		Reason for Leaving

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

## SECTION V: ADDITIONAL INFORMATION

List professional, trade, business or civic activities and/or offices held.

*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.*


### Other Qualifications

*Summarize special job-related skills and qualifications acquired from employment or other experience.*


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


Note to Applicants:

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing, with or without a reasonable accommodation, the activities involved and duties of the position for which you have applied? A description of the activities and duties involved in such position are attached.

\_\_\_\_\_ Yes      \_\_\_\_\_ No

## SECTION VI: REFERENCES

Name	Title		
Company or Organization			
Street Address	City	State	Zip Code
Phone Number (s)	Email		

Name	Title		
Company or Organization			
Street Address	City	State	Zip Code
Phone Number (s)	Email		

Name	Title		
Company or Organization			
Street Address	City	State	Zip Code
Phone Number (s)	Email		

Name	Title		
Company or Organization			
Street Address	City	State	Zip Code
Phone Number (s)	Email		

Name	Title		
Company or Organization			
Street Address	City	State	Zip Code
Phone Number (s)	Email		

An active application file consists of the following documents:

- Completed Employment Application
- Cover Letter
- Resume
- Copies of Licenses and/or Degrees

The TOWN OF NORTON, as a prerequisite to employment,  
requires successful passage of a pre-employment physical,  
and may conduct a criminal information records check.

*Please read the following statements carefully before signing your name.*

I understand that this application will remain active for three months. After three months, if I am still interested in a position with TOWN OF NORTON, it will be necessary for me to complete a new application.

### **RELEASE**

I **HEREBY CERTIFY** that the answers given to the above questions and statements are true and correct and hereby authorize you to contact references, past or present employers, schools, law enforcement agencies, and other sources of information which may be relevant to my application for employment. In consideration of the TOWN OF NORTON's review of this application, I release from all liability and/or legal claims the TOWN OF NORTON and every person seeking or providing information, whether it is oral or written. A photocopy and/or electronic version of this release shall be as valid as the original and may be relied upon by all persons providing information. It is understood and agreed that any misrepresentation, false statement, or omissions by me in this application will be sufficient reason for rejection of my application or for dismissal at any time during my employment without liability to TOWN OF NORTON. I have read, understand, and agree to the above statements. (Sign below).

As part of the hiring process, applicants who receive an offer of employment may be asked to submit to a screening test to detect the presence of drugs (marijuana, opiates, cocaine, amphetamines, phencyclidine (PCP)) or their metabolites. Offers of employment are conditioned on a negative result. If you are asked to submit to a drug test and you refuse to be tested, or you do not pass, the Town will revoke any offer of employment. All drug tests will be conducted in accordance with applicable federal and state law. Therapeutic levels of medically-prescribed or over-the-counter medicines may lead to positive test results.

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Date

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Applicant Signature