



**TOWN OF WESTMINSTER
11 SOUTH STREET
WESTMINSTER MA 01473
(978) 874-7400**

(REV. 07/18)

EMPLOYMENT APPLICATION FORM

The Town of Westminster is an Equal Opportunity Employer

All information must be typed or printed in readable writing. Unreadable application will be discarded.

Personal Information

1. Date of Application: _____ **2.** Position Applying For: _____

3. Name: _____
Last First Middle

4. Address: _____
Number Street Apartment Number

City/Town State Zip Code

5. Telephone Number: Home: _____ Daytime: _____
Area Code / Number Area Code / Number

6. Email Address: _____ **7.** Driver's License Number: _____
Class / Number / State

8. Are you legally authorized to work in the United States? YES NO

9. Are you under 18 years of age? YES NO

10. Have you ever been employed by the Town before? YES NO

If yes, when? _____ In which department? _____

11. Do you have an immediate family member (i.e. spouse, mother, father, sibling, or child) working for the Town of Westminster?

YES NO

If yes, Employee's Name: _____ Department: _____

Education

| Name / Location | Course of Study | Years Completed | Did you graduate? | Degree |
|--------------------|-----------------|-----------------|--|--------|
| High School | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| College | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Graduate School | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Business/Technical | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |

12. Do you possess the following skills? Please list in detail all that apply.

| | | | |
|---------------------------|------------------------------|-----------------------------|--------------------------------|
| Specialized Training? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Name of Training/Course: _____ |
| Professional Licenses? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Licenses: _____ |
| Professional Memberships? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Name of Organizations: _____ |
| Computer Software? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Name of Programs: _____ |
| Office Equipment? | <input type="checkbox"/> YES | <input type="checkbox"/> NO | Describe Equipment: _____ |

If more room is required, an additional sheet may be attached.

Employment History

List present employer first. A resume may also be included, however, this section must be completed.

13. Employer's Name: _____

Address: _____ Telephone Number: _____

Job title: _____ Worked From: _____ To: _____

Immediate Supervisor's Name and Job Title: _____

May we contact this employer? YES NO

Describe the work you performed: _____

Reason(s) for leaving: _____

14 . Employer's Name: _____

Address: _____ Telephone Number: _____

Job title: _____ Worked From: _____ To: _____

Immediate Supervisor's Name and Job Title: _____

May we contact this employer? YES NO

Describe the work you performed: _____

Reason(s) for leaving: _____

15 . Employer's Name: _____

Address: _____

Telephone Number: _____

Job title: _____

Worked From: _____ To: _____

Immediate Supervisor's Name and Job Title: _____

May we contact this employer? YES NO

Describe the work you performed: _____

Reason(s) for leaving: _____

16 . Employer's Name: _____

Address: _____

Telephone Number: _____

Job title: _____

Worked From: _____ To: _____

Immediate Supervisor's Name and Job Title: _____

May we contact this employer? YES NO

Describe the work you performed: _____

Reason(s) for leaving: _____

If more room is required, an additional sheet may be attached.

References

Please provide professional and/or business references only. Note that references listed in this section will be contacted.

17. Reference #1

Name: _____ Address: _____

Business Position: _____ Telephone _____ Home: _____

Work: _____

18. Reference #2

Name: _____ Address: _____

Business Position: _____ Telephone _____ Home: _____

Work: _____

19. Reference #3

Name: _____ Address: _____

Business Position: _____ Telephone _____ Home: _____

Work: _____

20. How did you learn about the job for which you are applying? Walk-in Town Employee
- Newspaper; title _____ Professional Journal; title _____
- Posted Town Bulletin _____ the Internet _____

Agreement

The information provided in this application for employment is true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

I authorize investigation of all statements contained in this application and the release of any pertinent information regarding my education, past employment history and background. I authorize the Town of Westminster to obtain any information from schools, employers or individuals relating to my activities. This information may include, but is not limited to: academics, achievement, performance, attendance, personal history and discipline. Further, I hereby authorize all references, persons, schools, my current employer (if applicable) and previous employers and organizations named in this application, unless otherwise stated, to provide the Town of Westminster any relevant information that may be required to arrive at an employment decision. I understand that the information released is for the Town of Westminster's use only.

I hereby voluntarily release, discharge and exonerate the Town of Westminster, its agents and representatives, and any person so furnishing information from any and all liabilities of every nature and kind arising out of the furnishing or inspection of such documents, records and other information or the investigations made by or on behalf of the Town of Westminster.

I understand that all appointments are "at-will" and/or may require a probationary period and that I must demonstrate my ability for continued employment. I also understand that I must be available from time to time to work outside normal business hours, as the needs of the department require.

I understand that any offer of employment that I receive from the Town of Westminster is contingent upon my successful completion of the pre-employment screening process, including but not limited to the Town receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry, if required, satisfactory verification of driver's license or certifications, where required, and satisfactory completion of any required post-offer pre-employment physical examination, drug test or psychological examination.

I understand that any employment offer by the Town is conditional upon my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986 within three days of the date of hire.

I represent that I have read and fully understand the foregoing and seek employment under these conditions.

Signature: _____

Date: _____

"Discrimination against any person in any practice or procedure in advertising, recruitment, referrals, testing, hiring, transfer, promotion or any other term, condition or privilege of employment which limits or adversely affects employment opportunities, because of political or religious opinions or affiliations, or because of race, color, sex, sexual orientation, national origin, marital status, pregnancy, parenthood, age or handicap which is unrelated to the person's occupational qualifications or any other non-merit factor which is not a bona fide occupational qualification is prohibited."

It is unlawful in Massachusetts to require a lie detector test as a condition of employment or continued employment. An employer who violates that law shall be subject to criminal penalties and civil liabilities.



**Town of Westminister
Release**

I _____ a candidate for the position of _____ hereby authorize the Town of Westminister to investigate all statements in my application and to secure any necessary information from all my employers, references, and academic institutions. I hereby release all of those employers, references, academic institutions, and the Town of Westminister from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the Town of Westminister.

I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials and employment references. I further understand that any false or misleading statements will be sufficient cause for rejection of my application if the Town of Westminister has not yet employed me and for immediate dismissal if the Town of Westminister has employed me. I also authorize the Town to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having legal and proper interest, and I hereby release the Town of Westminister from any and all liability for its providing this information.

I understand that nothing in this employment application, in the Town of Westminister's policy statements or personnel guidelines, or in my communications with any Town of Westminister official is intended to create an employment contract between the Town of Westminister and me. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon the Town of Westminister unless it is made in writing and signed by a duly authorized Town of Westminister official.

I hereby acknowledge that I have read and understand the preceding statement.

Signed: _____

[Signature of Applicant]

Date: _____