



TOWN OF TRURO

Employment Application

PLEASE READ BEFORE FILLING OUT THIS APPLICATION

The Town of Truro does not discriminate in hiring or employment on the basis of age, sex (including pregnancy, gender identity, and sexual orientation), race, color, disability, religious creed, parental status, ancestral origin, national origin, family medical history or genetic information, political affiliation, or military service. No question on this application is intended to secure information to be used for such discrimination.

To be sure your application is properly evaluated, all questions should be answered clearly, completely and accurately. If you need more space, please attach a separate sheet.

PERSONAL

DATE _____

NAME _____
Last First Middle

Address _____
Number Street City/Town State Zip Code

Mailing Address _____
(If different) P.O. Box or Street Address City/Town State Zip Code

Email Address _____

Telephone _____

Position(s) desired _____

Availability (check all that apply) ☐ Part-time ☐ Full-time

Salary desired _____ Date Available _____

If applying for a seasonal position, when would need to be your last day of work? _____

GENERAL INFORMATION

By whom or what source were you referred to us?

<input type="checkbox"/> Self	<input type="checkbox"/> School/ College	<input type="checkbox"/> Newspaper or Other Publication	<input type="checkbox"/> Employee Referral	<input type="checkbox"/> Other
Name: _____	Name: _____	Publication Name: _____	Name: _____	Explain: _____

If employed and you are under 18, can you furnish a work permit? ☐ Yes ☐ No

Have you filed an application here before? ☐ Yes ☐ No

If yes, please give date: _____

Have you ever been employed here before? ☐ Yes ☐ No

If yes, please give date: _____

Are you employed now? ☐ Yes ☐ No

May we contact your present employer?

☐ Immediately

☐ After acceptance of employment

☐ No

If no, please give reason

EMPLOYMENT EXPERIENCE

Start with your present or last job. **Include** military service assignments and volunteer activities. **Exclude** organization names which indicate race, color, religion, sex, or national origin.

Employer	
Dates Employed	
Address	
Job Title	
Supervisor	
Reason for Leaving	
Work Performed	

Employer	
Dates Employed	
Address	
Job Title	
Supervisor	
Reason for Leaving	
Work Performed	

Employer	
Dates Employed	
Address	
Job Title	
Supervisor	
Reason for Leaving	
Work Performed	

Employer	
Dates Employed	
Address	
Job Title	
Supervisor	
Reason for Leaving	
Work Performed	

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

Please describe other training, certifications, licenses (CDL), etc., or experience applicable to the job you are seeking.

Are you proficient in computer use? ☐ Yes ☐ No

(Programs you use or have used: _____)

EDUCATION

HIGH SCHOOL

Circle Last Year Completed

Name _____

1 2 3 4

Complete Address _____

Graduated ☐ Yes ☐ No

COLLEGE

Circle Last Year Completed

Name _____

1 2 3 4

Complete Address _____

Graduated ☐ Yes ☐ No Major Course of Study _____

OTHER SCHOOLS OR SPECIALIZED TRAINING

Circle Last Year Completed

Name _____

1 2 3 4

Complete Address _____

Graduated ☐ Yes ☐ No Degree/Certification Received _____

Scholastic Honors, Scholarships, etc., received _____

Do you intend to continue your education? ☐ Yes ☐ No

If yes, please give details _____

MILITARY INFORMATION

Branch _____ Rank _____ Dates _____

Honorable Discharge? _____

POLYGRAPH TESTS -- It is illegal for an employer to utilize a polygraph or any other testing device or written examination for testing truthfulness or honesty of anyone applying for a job or of those who are presently employed.

"It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability." (GLM 149: 19B; Employee Polygraph Protection Act of 1988).

REFERENCES

Please list below the name of three professional or work-related references.

Name	Title	Company	Phone Number	Years Acquainted

AGREEMENT

Please read before signing.

NOTE: If you have any questions regarding the following statement, please ask the Personnel Representative before signing.

I understand that receipt of this application and the granting of an interview does not imply that I will be employed.

I hereby affirm that the information provided by me on this application (and accompanying résumé, if any) is true and complete, and I understand that any false information or material omission of fact may disqualify me from further consideration for employment and may be considered justification for dismissal at a later date. I understand that any offer of employment is conditioned upon satisfactory results of reference verification, pre-employment physical, and CORI check, and that employment is for no stated term and may be terminated by me or the Town of Truro at any time.

I authorize persons, schools, current employer (if applicable) and previous employers and organizations named in this application (and accompanying résumé, if any) to provide the Town of Truro with any relevant information which may be required to arrive at an employment decision, and I voluntarily release such persons, schools, employers and organizations from all liability for providing such information. I release the Town of Truro against any liability which might result from requesting such information.

SIGNATURE _____

DATE _____

TRURO IS AN EQUAL OPPORTUNITY EMPLOYER.