



*Town of Millbury
127 Elm Street
Millbury, MA 01527
(tel) 508-865-4710
(fax) 508-865-0843
www.millbury-ma.org*

EMPLOYMENT APPLICATION

Please read the following before filling out this application:

The Town of Millbury (the "Town") is an Equal Opportunity Employer. The Town does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, handicap, military status, gender, age (as defined by law), sexual orientation (as defined by law) or genetic information. No question in this application is intended to secure information to be used for such discrimination.

All questions should be answered clearly, completely and accurately in your own handwriting. If you need more space, please attach a separate sheet. Please print and use ink.

PERSONAL

Date: _____

Name: _____
Last First Middle

Address: _____
Number Street City/Town State Zip Code

Mailing Address: _____
(If different) PO Box or Street Address City/Town State Zip Code

Telephone: (____) _____

Position(s) desired: _____

Salary desired: _____ Date Available to start: _____

GENERAL INFORMATION

How were you referred to us?

- Self
- School/college - Name _____
- Newspaper or publication - Name _____
- Employee referral - Name _____
- Other _____

GENERAL INFORMATION (Continued)

If you are hired and are under the age of 18, can you furnish a work permit? Yes No
Have you filed an application with the Town of Millbury before? Yes No Dates: _____
Have you ever been employed by the Town of Millbury before? Yes No
Department: _____
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 that indicate race, color, religion, gender or national origin.

#1

Employer: _____ Dates employed: From: _____ to: _____
Address: _____
Hourly rate/salary: Starting _____ Final: _____
Job Title _____ Work Performed _____
Supervisor: _____ Telephone: _____

#2

Employer: _____ Dates employed: From: _____ to: _____
Address: _____
Hourly rate/salary: Starting _____ Final: _____
Job Title _____ Work Performed _____
Supervisor: _____ Telephone: _____

#3

Employer: _____ Dates employed: From: _____ to: _____
Address: _____
Hourly rate/salary: Starting _____ Final: _____
Job Title _____ Work Performed _____
Supervisor: _____ Telephone: _____

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

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

EDUCATION (Do not answer if not relevant to the requirements of the position for which you are applying).

School	Name, Address, City, State	Did you Graduate	Degree
High School			
College			
Graduate School			
Military Information (Optional)			

REFERENCES

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

Name and Title	Company	Phone	Years Acquainted

AGREEMENT Please read before signing:

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

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 liabilities.

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

I understand that this application for employment shall be considered active for a period of time not to exceed forty-five (45) days. If I wish to be considered for employment after expiration of the forty-five (45) day period, I must file another application and inform the Town of my interest in employment.

I hereby affirm that the information provided by me on this application (and accompanying resume, 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 grounds for termination of employment in the event I am hired. I understand that any offer of employment is conditioned upon satisfactory replies from my references and a favorable pre-employment physical relative to the essential functions of the job, if applicable.

Signature

Date

Printed Name

I authorize persons, schools, current employers (if applicable) and previous employers and organizations named in this application (and accompanying resume, if any) to provide the Town of Millbury 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 which might result from their providing such information.

Signature

Date

Printed Name