

## TOWN OF EAST BRIDGEWATER

# **Employment Application**

www.eastbridgewaterma.gov

175 CENTRAL STREET, EAST BRIDGEWATER, MASSACHUSETTS 02333

Phone: 508-378-1600 Fax: 508-378-1636

### An Equal Opportunity/Affirmative Action Employer

The Town of East Bridgewater is an equal opportunity employer and does not discriminate against any applicant because of race, color, religion, sex, marital status, national origin, age, disability, sexual orientation, protected genetic information, gender identity, or any other class protected by federal, state or local law. Any person who needs assistance in fully participating in the application process should contact the Selectmen's Office.

A fully completed application is required for each position applied for. Also, "see resume" is not acceptable in any field.				
I. Contact Information Name	nation.		Date	
Address # and S	treet City and State		Zip Code	
Home Telephone	Cell Phone		email	
II. Position Appl	ying For (Please specify position title or jo	ob category).		
How did you hear abo	ut the position?			
Are you available to w	rork ☐ Full-time ☐ Part-time ☐ Oth mployed by the Town of East Bridgewater? Who		tment?	
Do you have any relat	ives working for the Town? If "yes", who?			
If hired, can you prov	ide proof of citizenship or legal right-to-work?	☐ Yes	□ No	
Are you on a layoff ar	d subject to recall?	☐ Yes	□ No	
Are you a veteran of t	he U.S. Armed Services?	☐ Yes	□ No	
III. Education.				
School	Name, Address, City, State	<b>;</b>	Dates Attended	Diploma, Degree/Certification
High School				
College				
Graduate School				
Trade, Business, Night Courses				
Military Service, Other Training				



Do you have a valid driver's license (Class D Auto)?	✓Yes	_ ✓No _	If ves, enter expirati	ion date
Do you have a valid CDL license (Class A or B)?			If yes, enter expirati	
Do you have a valid Hydraulic license?			If yes, enter expirati	
What other valid licenses or certifications do you poss			II yes, enter expirati	ion date
, , , , , , , , , , , , , , , , , , ,	,			
V. Office Skills (If applicable).	Check	the columr	n that you feel best describe	s your knowledge:
Skill	✓Begiı	nner	✓ Intermediate Level	✓Advanced Level
Knowledge of Word Processing				
Knowledge of Spreadsheets				
Knowledge of Databases				
Automated Accounting System Knowledge				
Bookkeeping				
Graphics				
Technology (website, networking, etc.)				
VI. Special Skills. Please list any other skills or abilities you feel are rele	vant:			
Please list any other skills or abilities you feel are relevant to the last 4 positions you have held any verifiable work performed as an intern or volunteer	ee resume") . Start with you			nclude military service
Please list any other skills or abilities you feel are relevant to the skills or abilities you feel are relevant to the last 4 positions you have held	ee resume") . Start with you	ır present o		nclude military service
Please list any other skills or abilities you feel are relevent.  WII. Employment History. (please do not write "selease account for the last 4 positions you have held any verifiable work performed as an intern or volunteed.	ee resume") . Start with you			nclude military service
Please list any other skills or abilities you feel are relevable.  Please list any other skills or abilities you feel are relevable.  Please account for the last 4 positions you have held any verifiable work performed as an intern or volunted.  Employer	ee resume") . Start with you	Address	S	nclude military service
Please list any other skills or abilities you feel are relevent.  Please account for the last 4 positions you have held any verifiable work performed as an intern or volunteed.  Employer  Telephone	ee resume") . Start with you	Address Title	S	nclude military service
Please list any other skills or abilities you feel are relevant to the last 4 positions you have held any verifiable work performed as an intern or volunted Employer  Telephone  Supervisor	ee resume") . Start with you	Address Title	S	nclude military service



Employer	Address	
Telephone	Title	
Supervisor	Dates Worked	
Reason for Leaving		
Description of Primary duties:		
Employer	Address	
Telephone	Title	
Supervisor	Dates Worked	
Reason for Leaving		
Description of Primary duties:		
Employer	Address	
Telephone	Title	
Supervisor	Dates Worked	
Reason for Leaving		
Description of Primary duties:	<b>1</b>	



VIII. Business References: (a minimum of 3 references is required. Please do not write "see resume")

Name	Address	Phone	Relationship
Name	Address	Phone	Relationship
Name	Address	Phone	Relationship

## IX. Employment of Minors.

The Town of East Bridgewater is subject to certain child labor provisions regarding the employment of persons under the age of 18. Further, an Employment Permit or Educational Certificate may be required, depending on your age.

Are you under age 18? If yes, please indicate your age:
X. Citizenship or Immigration Status.
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
YESNO
Proof of citizenship or immigration status will be required upon employment.

#### XI. Lie Detector Test.

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.

#### XII. Applicant's Statement

CAREFULLY READ ALL PARTS OF THIS APPLICATION FORM BEFORE SIGNING.

- A. I understand that acceptance of this application by the Town of East Bridgewater does not imply that I will be employed.
- B. The information that I have provided is true and complete. In the event of employment, I understand that misrepresentation or omission of any fact in my application, resume, or in any other materials or as provided during interviews, can be justification for refusal of employment or can be justification for termination from employment, if employed.
- C. I understand that any offer of employment that I receive from the Town of East Bridgewater is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of East Bridgewater receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry (CORI), satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination.
- D. In processing my application for employment, the Town of East Bridgewater may verify all of the information provided by me concerning, among other things, my prior employment or military record, education, character, general reputation and personal characteristics.
- E. 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 East Bridgewater 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 East Bridgewater any relevant information that may be required to arrive at an employment decision. I understand that the information released is for the Town of East Bridgewater's use only.

- F. I hereby release my present and former employers and all individuals contacted for factual information about me from any and all liability for damages arising from furnishing the requested information.
- G. If employed by the Town of East Bridgewater, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to undergo a physical examination, psychological examination (if required), that I may be subject to drug and/or alcohol testing, that the Town will request a Criminal Offense Record Inquiry (CORI check) on me, investigate my driving record or verify my license(s) or certification(s) as required for employment at any time during my employment. As a condition of employment an employee may be required to provide additional or updated information especially if this employee has been on workers compensation and may require both drug testing and an employment physical in order to allow us to have the necessary information for making a proper decision or reasonable accommodations, if necessary.
- H. I understand all appointments are probationary and that I must demonstrate my ability for continued employment. I understand that, if appointed, that the Town of East Bridgewater is an at-will employer and I am employed for an indefinite period of time. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.
- I. I understand that any employment offer by the Town is conditional upon my ability to establish employment under the Immigration Reform and Contract Act of 1986 within three (3) days of the date of hire.

My signature certifies that I have read and agree with the for employment and seek employment under these cor	he above statements and all statements contained in this application aditions.
Applicant Signature	Date
Applicant Name (Please Print)	_

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, gender identity, genetic information, sexual orientation, national origin, ancestry, marital status, military status, pregnancy, parenthood, age or handicap which is unrelated to a person's occupational qualifications or any other non-merit factor which is not a bona fide occupational qualification, or any other protected class under the law, is prohibited



### COMPLETION OF THIS FORM IS OPTIONAL

TO BE USED BY THE TOWN OF EAST BRIDGEWATER'S EEO/AA REPORTING REQUIREMENT

## INVITATION

Applicants are considered for all positions, and employees are treated during employment without regard to race, color, creed, religion, sex, sexual orientation, national origin, age, marital or veteran status, medical condition or handicap. The Town of East Bridgewater, as part of its commitment to equal employment opportunity and to its affirmative action program, invites all applicants to provide the following information.

The information is voluntary and refusal to provide it will not have any bearing on our employment decision. The data is confidential and will be filed separately. It will be available only to authorized personnel for research, reporting and evaluation purposes. The information is needed to document the hiring practices of the Town of East Bridgewater and to assess the effectiveness of its affirmative action program. Your cooperation would be appreciated but is entirely voluntary.

Position Applied For:	Dat	e:	
SEX:	AGE:	ORIGIN	
□ Male	□ under 16		☐ White
☐ Female	□ 16-39		☐ Black
	□ 40-69		☐ Hispanic
	□ 70+		☐ Asian/Pacific Islander
			☐ American Indian
			☐ Alaskan Native
			☐ Cape Verdean
			L cape verdean
HANDICAP	VIETNAM ERA VETERAN		
☐ Mental	☐ Yes		
□ Physical	□ No		
□ None			

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