



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

Specialized training? YES \_\_\_ NO \_\_\_ Name of Training/Course: \_\_\_\_\_  
Professional licenses? YES \_\_\_ NO \_\_\_ Licenses: \_\_\_\_\_  
Professional memberships? YES \_\_\_ NO \_\_\_ Name of Organization: \_\_\_\_\_  
Computer Software? YES \_\_\_ NO \_\_\_ Name of Programs: \_\_\_\_\_  
Office Equipment? YES \_\_\_ NO \_\_\_ Describe Equipment: \_\_\_\_\_

## EMPLOYMENT HISTORY

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

15. Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked from: \_\_\_\_\_ to \_\_\_\_\_

Immediate Supervisor's name and Job Title: \_\_\_\_\_

Salary: \_\_\_\_\_ / \_\_\_\_\_ May we contact this employer? YES \_\_\_ NO \_\_\_  
Starting Ending

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: \_\_\_\_\_

Salary: \_\_\_\_\_ / \_\_\_\_\_ May we contact this employer? YES \_\_\_ NO \_\_\_  
Starting Ending

Describe the work you performed: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

17. Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked from: \_\_\_\_\_ to: \_\_\_\_\_

Immediate Supervisor's Name and Job Title: \_\_\_\_\_

Salary: \_\_\_\_\_ / \_\_\_\_\_ May we contact this employer? YES \_\_\_ NO \_\_\_  
Starting Ending

Describe the work you performed: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

18. Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Job Title: \_\_\_\_\_ Worked From: \_\_\_\_\_ To: \_\_\_\_\_

Immediate Supervisor's Name and Job Title: \_\_\_\_\_

Salary: \_\_\_\_\_ / \_\_\_\_\_ May we contact this employer? \_\_\_\_\_ YES \_\_\_\_\_ NO  
Starting Ending

Describe the work you performed: \_\_\_\_\_

Reason(s) for leaving: \_\_\_\_\_

## REFERENCES

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

19. Reference #1

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Business Position: \_\_\_\_\_ Telephone \_\_\_\_\_ Home: \_\_\_\_\_  
Work: \_\_\_\_\_

20. Reference #2

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Business Position: \_\_\_\_\_ Telephone \_\_\_\_\_ Home: \_\_\_\_\_  
Work: \_\_\_\_\_

21. Reference #3

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Business Position: \_\_\_\_\_ Telephone \_\_\_\_\_ Home: \_\_\_\_\_  
Work: \_\_\_\_\_

22. Reference #4

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Business Position: \_\_\_\_\_ Telephone \_\_\_\_\_ Home: \_\_\_\_\_  
Work: \_\_\_\_\_

23. 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 \_\_\_\_\_



# Town of South Hadley Release

I \_\_\_\_\_ a candidate for the position of \_\_\_\_\_

Hereby authorize the Town of South Hadley to investigate all statements in my application and to secure any necessary information from all my employers, references, and academic institutions, and the Town of South Hadley 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 South Hadley.

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 South Hadley has not yet employed me and for immediate dismissal if the Town of South Hadley 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 South Hadley from any and all liability for its providing this information.

In the event of my employment with the Town of South Hadley, I will comply with all rules, regulations, and policies set forth in the Town of South Hadley's Salary Administration Plan Bylaw or other communications distributed by the Town of South Hadley.

I understand that nothing in this employment application, in the Town of South Hadley's policy statements or personnel guidelines, or in my communications with any Town of South Hadley official is intended to create an employment contract between the Town of South Hadley 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 South Hadley unless it is made in writing and signed by a Town of South Hadley official.

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

Signed: \_\_\_\_\_  
(Signature of Applicant)

Date \_\_\_\_\_

## 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 in the 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 South Hadley 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 South Hadley any relevant information that may be required to arrive at an employment decision. I understand that the information released is for the Town of South Hadley's use only.

I hereby voluntarily release, discharge and exonerate the Town of South Hadley, 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 of inspection of such documents, records and other information or the investigations made by or on behalf of the Town of South Hadley.

I understand that all appointments are probationary 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 of normal business hours, as the need of the department require.

If required for the position I am seeking, I agree to take a physical examination, which may include testing for drugs or a psychological examination, as required, and recognize that any offer of employment may be contingent upon the results of such an 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.**

# Voluntary Affirmative Action Request Form

**The Town of South Hadley, as part of its commitment to Affirmative Action/Equal Employment Opportunities** policy, invites you to provide the following information. All applicants will be considered without regard to race, color, religion, gender, national origin, age, marital or veteran status, medical condition or disability. 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 and is used to further the Town's Affirmative Action/Equal Employment Opportunity policies. Your cooperation is appreciated.

1. Position Title: \_\_\_\_\_

2. Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female

3. Ethnic Origin:

White – All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

Black – All persons having origins in any of the black racial groups of Africa.

Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American or Other Spanish culture or origin regardless of race.

Asian or Pacific Islander – All persons having origins in any of the peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, For example, China, Japan, Korea, Philippine Islands and Samoa.

American Indian or Alaskan Native – All persons having origins in any of the original people of North America maintaining cultural identification through tribal affiliations or Community recognition.

Cape Verdean – All persons having origins on the Cape Verde Islands.

4. National Origin: \_\_\_\_\_

5. Veteran Status: \_\_\_\_\_ YES \_\_\_\_\_ NO  
Vietnam Era, 1962-1975 \_\_\_\_\_ YES \_\_\_\_\_ NO

6. Disabled: \_\_\_\_\_ YES \_\_\_\_\_ NO