



# TOWN OF SUTTON

## EMPLOYMENT APPLICATION

*All information must be typed or printed in legible writing.*

Applicants are considered for all positions without regard to race, color, religion, gender orientation, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.

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Date of application:

\_\_\_\_\_

Referral source (check):

Advertisement \_\_\_\_\_ Job posting \_\_\_\_\_ Relative \_\_\_\_\_ Friend \_\_\_\_\_ Other \_\_\_\_\_

### SECTION I: PERSONAL INFORMATION

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

Last

First

Middle

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

Number & Street

Town/City

State

Zip Code

Email: \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Cell \_\_\_\_\_

If hired, can you provide proof of citizenship or legal right to work? YES \_\_\_\_\_ NO \_\_\_\_\_

Are you 18 years old or older? YES \_\_\_\_\_ NO \_\_\_\_\_

Have you worked for the Town of Sutton before? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, give dates of employment From: \_\_\_\_\_ To: \_\_\_\_\_

Which Department: \_\_\_\_\_

Having reviewed the duties of the job, which have been provided to you, are you capable of performing all the duties of the job? YES \_\_\_\_\_ NO \_\_\_\_\_

If no, which duty (ies) are you not capable of performing? \_\_\_\_\_

Are you Currently Employed: YES \_\_\_\_\_ NO \_\_\_\_\_

Are you on a layoff and subject to a recall? YES \_\_\_\_\_ NO \_\_\_\_\_

**SECTION II: REFERENCES, MISCELLANEOUS**

List profession, trade, business or civic activities and offices held. (you may exclude those which indicate race, color, religion, gender orientation, national origin, age, marital or veteran’s status):

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Please supply name, address, and telephone number of three (3) references (who are not related to you):

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**SECTION III: APPLICANT’S ACKNOWLEDGEMENT**

*PLEASE READ CAREFULLY BEFORE SIGNING THIS EMPLOYMENT APPLICATION.*

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.

I hereby authorize my present and former employers, educational institutions and references to disclose to the Town any and all information concerning my previous employment and any other pertinent information they may have, and I release all parties from any liability whatsoever resulting from such disclosure.

I certify that all the information provided by me on this Employment Application (and accompanying resume and/or other documents, if any) is true, accurate, 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 interviews(s) may result in withdrawal of any job offer or termination of employment.

I understand that an offer of employment may be conditioned upon the results of a medical screening exam, pre-employment drug screening, criminal records check, and/or a background check.

I understand that all appointments are probationary and that I must demonstrate my ability for continued employment. I understand that, if appointed, my employment will be at-will, for an indefinite period, and can be terminated at any time by the Town, unless otherwise stated in a collective bargaining agreement which covers the position to which I am appointed. I also understand that I must be available from time to time to work outside normal business hours, as the needs of the department required.

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICANT DO NOT WRITE BELOW THIS LINE**

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**Interview Date:** \_\_\_\_\_ **Interviewer:** \_\_\_\_\_

**Remarks:** \_\_\_\_\_

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**Action Taken:** \_\_\_\_\_