

# 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.

Da	ate of application:		
Referral source (check):			
Advertisement Job posting	Relative	Friend	Other
SECTION I: P	ERSONAL INFO	ORMATION	
Name:			
Last	First		Middle
Address:			
Number & Street	Town/City	State	Zip Code
Email:			
Telephone: Home	Cel	l	
If hired, can you provide proof of citizenshi	o or legal right to v	vork? YES	NO
Are you 18 years old or older? YES	NO		
Have you worked for the Town of Sutton be	efore? YES	NO	
If yes, give dates of employment	From:	То:	
Which Department:		_	
Having reviewed the duties of the job, whic performing all the duties of the job? YES	-	ded to you, are you NO	u capable of

Last	Updated	4/8/2022
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If no, which duty (ies) are you not o	capable of perf	forming?	
Are you Currently Employed: YES	NO		
Are you on a layoff and subject to a recall	? YES	NO	
SECTION I	I: EMPLOYN	IENT HISTORY	
Employer's Name:			
Address:			
Job Title:			
Dates Employed: From:	Τ	0:	
Describe work you performed:			
Immediate Supervisor's Name and job titl	e:		
May we contact this employer? YES	NO	_	
Reasons for leaving or seeking other emp	loyment:		
Employer's Name:			
Address:			
Job Title:			
Dates Employed: From:	T	0:	
Describe work you performed:			
Immediate Supervisor's Name and job titl	e:		
May we contact this employer? YES	NO	_	
Reasons for leaving or seeking other emp	loyment:		
Employer's Name:			
Address:			
Job Title:			
Dates Employed: From:	T	0:	

Immediate Supervisor's	Name and job title:			
May we contact this em	ployer? YES	_NO		
Reasons for leaving or s	eeking other employ	yment:		

List here any verified work performed on a volunteer basis:

#### **SECTION III: EDUCATION**

	Name & Location of School	Dates Attended	Diploma, Degree/Certificate		you uate?
High School				Yes	No
Vocational, Technical or Correspondence				Yes	No
College/University				Yes	No
Graduate/Professional				Yes	No

Describe specialized Training, Apprenticeship License, Foreign Language Skills, Skills and Extra Curricular Activities:

State any additional information you feel may be helpful to us in understanding your application.

## SECTION IV: COMPUTER SKILLS (PLEASE CHECK)

SKILL	BEGINNER	INTERMEDIATE	ADVANCED
Word Processing			
Spreadsheets			
Databases			
Graphics			
Web Design			
Technology/Network			
Bookkeeping			
Accounting Systems			
Typing/Keyboard			

Other: You may, if you wish, attach a separate sheet stating briefly why you wish to work for the Town of Sutton, and describing any additional experiences, skills, or abilities that you believe qualify you for the position you seek.

#### SECTION V: MILITARY HISTORY

Veteran of U.S. Armed Forces? YES NO	-
Branch:	
Rank when Discharged:	Discharge Status:
Present Military Status:	
Service School or special experience:	

#### SECTION VI: 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):

Please sup to you):	ply name, address, and telephone number of three (3) references (who are not related
1.	
2.	
3.	

Last Updated 4/8/2022

## SECTION VII: 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

Interview Date:	Interviewer:
Remarks:	
Action Takon	
Action Taken:	

Last Updated 4,	/8/2022
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