

Town of BoltonEmployment Application

All information must be typed or printed in readable writing. Unreadable application will be discarded.

Personal Information					
1. Date of Application:		2. Position Applying For:			
3. Name:		4. Telephone	Number: Home:		
Last First	Middle	·		a Code / Number	
			buytime		
5. Address:Number	Street		Apartment	Number	
City/Town	State		Zip Code		
6. Driver's License Number:					
	Class / Number / State				
7. If hired, can you provide proof of	of citizenship or legal right to work?	YES	\square NO		
8. Are you under 18 years of age?	☐ YES ☐ NO	If yes, date of	of birth?		
9. Have you ever been employed b	by the Town before? YES In v	☐ NO which departmer	nt?		
☐ YES ☐ NO	nily member (i.e. spouse, mother, f		_		
	Educa	tion			
		# of Years	T	T	
Name / Location	Course of Study	Completed	Did you graduate?	Type of Degree(s)	
High School			☐ YES ☐ NO		
College			☐ YES ☐ NO		
Graduate School			☐ YES ☐ NO		
Business/Technical			☐ YES ☐ NO		
11 . Do you possess the following s	kills? Please list in detail all that ap	oply.			
Specialized Training?	☐ YES ☐ NO Name	of Training/Cou	rse:		
Professional Licenses?					
Professional Memberships? YES NO Name of Organizations:					

Computer Software? \square YES \square NO Name of F	Programs:					
Office Equipment? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	Equipment:					
Employment History						
List present employer first. A resume or supplemental sheet may	be included, however, this section must be completed.					
12. Employer's Name:						
Address:	Telephone Number:					
Job title:	Worked From:To:					
Immediate Supervisor's Name and Job Title:						
May we contact this employer? \square YES \square NO						
Describe the work you performed:						
Reason(s) for leaving:						
13 . Employer's Name:						
Address:	Telephone Number:					
Job title:	Worked From:To:					
Immediate Supervisor's Name and Job Title:						
May we contact this employer? \square YES \square NO						
Describe the work you performed:						
Reason(s) for leaving:						
14 . Employer's Name:						
Address:						
Job title:	Worked From:To:					
Immediate Supervisor's Name and Job Title:						
May we contact this employer? \square YES \square NO						
Describe the work you performed:						
Reason(s) for leaving:						
15 . Employer's Name:						
Address:	Telephone Number:					
Job title:	Worked From:To:					

Worked From:______To:____

Immediate Supervisor's Name and Job Title:							
May we contact this employer? \square YES	\square NO						
Describe the work you performed:							
Reason(s) for leaving:							
	Reason(s) for leaving: If more room is required, an additional sheet may be attached.						
References							
Please provide professional and/or business references only. 16. Reference #1	Note that referen	ces listed in this section will be contacted.					
Name:	_Address:						
Business Position:	_ Telephone	Home:					
		Work:					
17. Reference #2							
Name:	_Address:						
Business Position:	_ Telephone	Home:					
		Work:					
18. Reference #3							
Name:	_Address:						
Business Position:	_ Telephone	Home:					
		Work:					
19. Reference #4							
Name:	_Address:						
Business Position:	_ Telephone	Home:					
		Work:					
20. How did you learn about the job for which you are applying?							
Newspaper; title		Professional Journal; title					
Posted Town Bulletin		Internet					

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

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

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 normal business hours, as the needs 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, gender identity, genetic information, sexual orientation, national origin, ancestry, marital status, military 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, or any other protected class under the law, is prohibited.

Town of Bolton Release

I a candidate for the po authorize the Town of Bolton to investigate all sta information from all my employers, references, ar employers, references, academic institutions, and the giving or receiving information about my employment	nd academic institutions. I hereby rele e Town of Bolton from any and all liability	ease all of those arising from thei
suitability for employment with the Town of Bolton. I understand that any offer of employment is continuated academic credentials and employment references. I	ngent upon receipt of a satisfactory repo	ort concerning my
will be sufficient cause for rejection of my application immediate dismissal if the Town of Bolton has emploabout my employment record, in whole or in part, agency, or other party having legal and proper interestall liability for its providing this information.	oyed me. I also authorize the Town to s in confidence to any prospective emplo	supply information byer, governmen
In the event of my employment with the Town of Bolt forth in the Town of Bolton Personnel Bylaw or other		
I understand that nothing in this employment applica guidelines, or in my communications with any Tow contract between the Town of Bolton and me. No property of the I understand that no such promise or guarantee is bit and signed by a Town of Bolton official.	n of Bolton official is intended to create omises regarding employment have been	e an employmen n made to me and
I hereby acknowledge that I have read and understar	nd the preceding statement.	
Signed:	Date:	
[Signature of Applicant]		