

TOWN OF HOLDEN

Employment Application Town Manager's Office

1204 Main Street, Holden, MA 01520

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

Personal Information				
1. Date of Application:	Date of Application: 2. Position Applying For:			
3. Name:		4. Telephone Number:		
Last First Middle		Email Addr	ess:	
5. Address:Number	Street		Apartment	Number
 City/Town	State		Zip Code	
5. Driver's License Number:	Class / Number / State			
7. If hired, can you provide proc	of of citizenship or legal right to w	ork? 🗌 YES	\square NO	
3. Are you under 18 years of ag	e? 🗌 YES 🔲 NO	If yes, date o	f birth?	
	d by the Town before?	☐ NO In which departmen	t?	
☐ YES ☐ NO	family member (i.e. spouse, mothe O ne:			
	Edu	cation		
Name / Location	Course of Study	# of Years Completed	Did you graduate?	Type of Degree(s)
High School			☐ YES ☐ NO	
College			☐ YES ☐ NO	
Graduate School			☐ YES ☐ NO	
Business/Technical			☐ YES ☐ NO	
L1. Do you possess the followin	g skills? Please list in detail all tha	at apply.		
Specialized Training?				
Professional Licenses?	☐ YES ☐ NO Lic	enses:		

Professional Memberships? YES NO Name of	of Organizations:		
Computer Software? \square YES \square NO Name of	Name of Programs:		
Office Equipment? \square YES \square NO Describe If more room is required, an additional sheet may be attached.	e Equipment:		
Employment	History		
List present employer first. A resume or supplemental sheet ma			
12. Employer's Name:			
Address:			
Job title: Immediate Supervisor's Name and Job Title:			
	NO		
Describe the work you performed:			
Reason(s) for leaving:			
13. Employer's Name:			
Address:	Telephone Number:		
Job title:	To:To:		
Immediate Supervisor's Name and Job Title:			
May we contact this employer? \square YES \square N	NO		
Describe the work you performed:			
Reason(s) for leaving:			
14. Employer's Name:			
Address:	Telephone Number:		
Job title:	To:To:		
Immediate Supervisor's Name and Job Title:			
May we contact this employer? \square YES \square N	NO		
Describe the work you performed:			
Reason(s) for leaving:			
15. Employer's Name:			
Address:	Telephone Number:		

Job title:		Worked From:	To:
Immediate Supervisor's Name and Job Title: _			
May we contact this employe	er? 🗆 YES 🗆 NO		
Describe the work you performed:			
Reason(s) for leaving:			
If more room is required, an additional sheet n	nay be attached.		
	References		
Please provide professional and/or business real 16. Reference #1	ferences only. Note that refere	nces 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 y	you are applying?	alk-in 🗌 Tov	vn Employee
Newspaper; title		Professional Journal; title_	
Posted Town Bulletin	Г	The Internet	
i osteu town dulletin		THE III.EIIIEL	

The Town of Holden is an Affirmative Action / Equal Employment Opportunity Employer

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

I hereby voluntarily release, discharge and exonerate the Town of Holden, 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 Holden.

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 Holden Release

I a candidate for the posit	
authorize the Town of Holden to investigate all state information from all my employers, references, and	
employers, references, academic institutions, and the T giving or receiving information about my employment his	
suitability for employment with the Town of Holden.	story, my academic credentials of qualifications, and my
I understand that any offer of employment is continged academic credentials and employment references. If use will be sufficient cause for rejection of my application is immediate dismissal if the Town of Holden has employ about my employment record, in whole or in part, in agency, or other party having legal and proper interest, all liability for its providing this information.	ther understand that any false or misleading statements f the Town of Holden has not yet employed me and for ed me. I also authorize the Town to supply information confidence to any prospective employer, governmen
In the event of my employment with the Town of Holder forth in the Town of Holden Personnel Bylaw or other c	
I understand that nothing in this employment application guidelines, or in my communications with any Town of contract between the Town of Holden and me. No promise understand that no such promise or guarantee is bind and signed by a Town of Holden official.	of Holden official is intended to create an employment nises regarding employment have been made to me and
I hereby acknowledge that I have read and understand	the preceding statement.
Signed:	Date:
[Signature of Applicant]	

Voluntary Affirmative Action Request Form

The Town of Holden as part of its commitment to Affirmative Action / Equal Employment Opportunity policies, invites you to provide the following information. All applicants will be considered without regard to race, color, religion, sex, gender identity, genetic information, sexual orientation, national origin, age, marital status, veteran status, medical condition or disability, handicap of a qualified handicapped person unless based upon a bona fide occupational qualification, or any other protected class under the law. 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, the 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	<u> </u>
5.	Veteran Status	: YES NO
	Vietnam Era, 1	962 – 1975 🗌 YES 🔲 NO
6.	Disabled:	☐ YES ☐ NO