



# TOWN OF HARWICH

## DEPARTMENT OF PUBLIC WORKS

273 Queen Anne Road • P.O. Box 1543 • Harwich, MA 02645

Telephone (508) 430-7555

Fax (508) 430-7598

## Application for Employment

It is the policy of the Town of Harwich to afford equal employment opportunity to all qualified persons regardless of race, color, religion, national origin, age, military status, sexual orientation, disability, or gender, except where age or sex is a bonafide occupational qualification as allowed by the Civil Rights Act of 1964. *An Equal*

*Opportunity / Affirmative Action Employer.*

To be sure that your application is properly evaluated, all questions should be answered clearly, completely, and accurately. Please print clearly in black or blue ink.

**“SEE RESUME” is not acceptable in any field.**

<i>Position(s) Applied For</i>		<i>Date of Application</i>			
<i>Last Name</i>		<i>First Name</i>		<i>Middle Name</i>	
<i>Address</i>	<i>Number</i>	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<i>Telephone Number (s)</i>		<i>Email</i>		<i>Social Security Number</i>	
<i>Home</i>		<i>Cell</i>			
<i>Emergency Contact Information:</i>					
<i>Name</i>		<i>Phone</i>			

Have you ever filed an application with us before?  YES  NO

If Yes, give date \_\_\_\_\_

Have you ever been employed with us before:  YES  NO

If Yes, give date \_\_\_\_\_

Are you currently employed?  YES  NO

May we contact your present employer?  YES  NO

On what date would you be available for work? \_\_\_\_\_

Have you ever had your right to operate a motor vehicle suspended?  YES  NO

If yes, please explain: \_\_\_\_\_

Have you ever been subject to disciplinary action in previous employment, or have you been asked to resign?  YES  NO

If yes, please explain: \_\_\_\_\_

Do you have any physical limitations that preclude you from performing any work for which you are being considered?  YES  NO

If yes, please explain: \_\_\_\_\_

## Education

School Name	Name, Address, City, State	Course of Study	Years Attended	Degree Earned
High School				
College				
Graduate School				
Trade, Business, Night Courses				
Military Service, Other Training				

## Special Skills & Qualifications

List all job-related skills and qualifications including all licenses held and equipment operated.

---



---



---



---



---



---



---

## References

Give name, address, and telephone number of three (3) references who are not related to you, are not previous employers, and can comment on your work performance and/or experience.

Name	Address	Phone	Years Acquainted	Occupation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

# Employment History

List below the last four employers, starting with the most recent. Indicate with an asterisk \* which employers you do not authorize the Town of Harwich to contact as a reference.

A resume may not be substituted for this application, but may be attached as a supplement.

Resume Attached?       YES       NO

1.	Employer		Dates Employed		Primary Duties
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate / Salary		
	Job Title	Supervisor	Starting	Final	
Reason for Leaving					
2.	Employer		Dates Employed		Primary Duties
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate / Salary		
	Job Title	Supervisor	Starting	Final	
Reason for Leaving					
3.	Employer		Dates Employed		Primary Duties
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate / Salary		
	Job Title	Supervisor	Starting	Final	
Reason for Leaving					
4.	Employer		Dates Employed		Primary Duties
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate / Salary		
	Job Title	Supervisor	Starting	Final	
Reason for Leaving					

If you need additional space, please continue on a separate sheet of paper

# Release and Certification

## PLEASE READ BEFORE SIGNING

I understand that acceptance of this application by the Town of Harwich does not imply that I will be employed.

The information that I have provided is true and complete. I understand that misrepresentation or omission of any fact in my application, resume, or in any other materials or as provided during interviews, can be justification for refusal of employment or can be justification for termination from employment, if employed.

I understand that any offer of employment that I receive from the Town of Harwich is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Harwich receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry if required, satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination.

In processing my application for employment, the Town of Harwich may verify all of the information provided by me concerning, among other things, my prior employment or military record, education, character, general reputation and personal characteristics.

I authorize the Town to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting my present and former employers, by contacting individuals listed as business, educational or personal references, and by contacting other individuals to provide or further clarify information about me.

I hereby release my present and former employers and all individuals contacted for factual information about me from any and all liability for damages arising from furnishing the requested information.

If employed by the Town of Harwich, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to undergo a physical examination, that I may be subject to drug and/or alcohol testing, that the Town may require a Criminal Offense Record Inquiry (CORI check) on me, investigate my driving record or verify my license(s) or certifications(s) as required for employment at any time during my employment. As a condition of employment an employee may be required to provide additional or updated information especially if this employee has been on workers compensation and may require both drug testing and an employment physical in order to allow us to have the necessary information for making a proper decision or reasonable accommodations, if necessary.

I understand that the Town of Harwich is an at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.

My signature certifies that I have read and agree with the above statement and all statements contained in this application for employment.

---

Applicant Name (Please Print)

Applicant Signature

Date