



Town of Oak Bluffs

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, martial or veteran status, or any other legally protected status.

Position(s) Applied For: _____		Date of Application: _____
How Did you Learn About Us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Inquiry
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____

Last Name:		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number(s) _____				Social Security Number _____	

Best time to contact you at home is: _____		AM	PM
If you are under 18 years of age, can you provide required proof of your eligibility to work?		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
Have you ever filed an application with us before?		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
If Yes, give date _____			
Have you ever been employed with us before?		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
If Yes, give date _____			
If Yes, state name, relationship and location _____			
Are you currently employed?		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
May we contact your present employer:		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
<i>Proof of citizenship or immigration status will be required upon employment</i>			
Date available for work ____/____/____		What is your desired salary range _____	
Are you available to work:		Full Time _____	
		Part Time _____	
		Temporary (Please indicate dates ____/____ - ____/____)	
Are you currently on "lay-off" status and subject to recall?		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
Can you travel if a job requires it?		<input type="checkbox"/>	<input type="checkbox"/>
		Yes	No
WE ARE AN EQUAL OPPORTUNITY EMPLOYER			

EDUCATION

School	Name and Address of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				

WORK EXPERIENCE

Start with your present or last job. Include any job related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates	Employed	Work Performed		
Address	From	To			
Telephone Number(s)					
Starting/Present Job Title	Hourly Rate/Salary				
Supervisor	Starting	Final			
Reason for Leaving			May we contact?	Yes	No

Employer	Dates	Employed	Work Performed		
Address	From	To			
Telephone Number(s)					
Starting/Present Job Title	Hourly Rate/Salary				
Supervisor	Starting	Final			
Reason for Leaving			May we contact?	Yes	No

Employer	Dates	Employed	Work Performed		
Address	From	To			
Telephone Number(s)					
Starting/Present Job Title	Hourly Rate/Salary				
Supervisor	Starting	Final			
Reason for Leaving			May we contact?	Yes	No

Employer	Dates	Employed	Work Performed		
Address	From	To			
Telephone Number(s)					
Starting/Present Job Title	Hourly Rate/Salary				
Supervisor	Starting	Final			
Reason for Leaving			May we contact?	Yes	No

Comments: Include explanation of any gaps in employment

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job related training received in the United States military

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, disability or other protected status

ADDITIONAL INFORMATION

Other Qualifications *Summarize special job-related skills and qualifications acquired from employment or other experiences*

SPECIALIZED SKILLS (Skills/Equipment operated)

Computer	Spreadsheet	Machinery (list)	Other (list)
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Word Processing		
<input type="checkbox"/> WPM			
State any additional information you feel may be helpful to us in considering your application			

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities in such a job or occupation has been given.

☐ YES ☐ NO

PERSONAL/PROFESSIONAL REFERENCES:

Do not include family members or past supervisors.

Name:	Phone Number	Best Time to Call	Occupation
1			
2			
3			

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law; any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date