

Town of Plymouth Employment Application

Human Resources Department

11 Lincoln Street, Plymouth MA 02360 Phone: 508-747-1620 Ext. 101 Fax: 508-830-4140 humanresources@townhall.plymouth.ma.us www.plymouth-ma.gov

An Equal Opportunity/Affirmative Action Employer

The Town of Plymouth is an equal opportunity employer and does not discriminate against any applicant because of race, color, religion, sex, marital status, national origin, age, disability, sexual orientation or any other class protected by federal, state or local law. Any person who needs assistance in fully participating in the application process should contact the Town of Plymouth Human Resources Department.

I. Contact Informati	ion				
. Comact imormati	ion				
Name			Date		
Address	Ci	ty and State	Zip Co	ode	
Telephone			E-Mail		
I. Position Applyin	g For (Please	specify position title)			
How did you hear aboเ	ut the position?				
Have you ever been er	mployed by the	Town of Plymouth? If so, w	nen and what departm	nent?	
Are you related to an e	mployee curren	tly employed by the Town o	f Plymouth?		
III. Education					
School		Name, Address, O	ity State	Number of Years Attended	Diploma Degree

School	Name Address City State	Number of Years Attended	Diploma/
	Name, Address, City, State	Tears Attenueu	Degree
High School			
College			
Graduate School			
Other			

required)) Do you have a valid driver's license (Class D Auto)? Do you have a valid CDL license (Class A or B)?			_ No	If yes, enter expiration	es, enter expiration datees, enter expiration date	
			_ No	_ If yes, enter expiration		
Do you have a valid Hydraulic license? Yes N			_ No	If yes, enter expiration	date	
Please list all valid licenses, certificat	ions, and endors	ements yo	u possess?			
/. Office Skills (If applicable)		•	u feel best	describes your knowledge:		
Microsoft Word	√ Be	eginner		√ Intermediate Level	√ Advanced Level	
Microsoft Excel						
Microsoft Access						
Microsoft Power Point						
Bookkeeping Knowledge						
II. Employment History (Pleas	e do not write	"see res	ume")			
lease account for the last 3 position nd any verifiable work performed as	s you have held.	Start with	your preser () may	() may not contact you	y include military servic ur present employer.	
lease account for the last 3 position nd any verifiable work performed as	s you have held.	Start with	your preser () may	nt or last employer. You ma () may not contact you Address	y include military servic ur present employer.	
Please account for the last 3 position nd any verifiable work performed as Employer	s you have held.	Start with	your preser	() may not contact you	y include military servic ur present employer.	
VII. Employment History (Pleas Please account for the last 3 position and any verifiable work performed as Employer Telephone Supervisor	s you have held.	Start with	your preser () may	() may not contact you	y include military servic ur present employer.	
Please account for the last 3 position and any verifiable work performed as Employer Telephone	s you have held.	Start with	your preser () may	() may not contact you Address	y include military servicur present employer.	
Please account for the last 3 position and any verifiable work performed as Employer Telephone Supervisor Salary Received	s you have held.	Start with	your preser () may	() may not contact you Address Fitle Dates Worked	y include military servicur present employer.	
lease account for the last 3 position and any verifiable work performed as Employer Telephone Supervisor Salary Received Description of Primary duties:	s you have held.	Start with	your preser () may	() may not contact you Address Fitle Dates Worked	y include military servicur present employer.	
lease account for the last 3 position and any verifiable work performed as Employer Telephone Supervisor Salary Received Pescription of Primary duties:	s you have held.	Start with	your preser () may	() may not contact you Address Fitle Dates Worked Reason for Leaving	y include military servicur present employer.	
Please account for the last 3 position and any verifiable work performed as Employer Telephone Supervisor Salary Received Description of Primary duties: Employer Telephone	s you have held.	Start with	your preser () may	Address Title Dates Worked Reason for Leaving	y include military servicur present employer.	
Please account for the last 3 position and any verifiable work performed as Employer Telephone Supervisor	s you have held.	Start with	your preser () may	Address Fitle Dates Worked Reason for Leaving Address	y include military servicur present employer.	

Employer		Address	Address		
Telephone		Title	Title		
Supervisor	_	Dates Worked			
Salary Received	_	Reason for Leaving	9		
Description of Primary d	uties:				
VIII. Military History					
Veteran of US Armed Force	es?YesNO	Branch			
Discharge Status		Rank when discharged			
Present Military Status					
IX. Business Reference	es (a minimum of 3 references	required, please do not write "see	e resume")		
Name	Address	Phone	Relationship		
Name	Address	Phone	Relationship		
Name	Address	Phone	Relationship		
for certain positions.	·	Record Inquiry (CORI check) on ment depending upon the specif			
	s subject to certain child labor	provisions regarding the employ nal Certificate may be required,			
Are you under age 18?	If yes, please indicate your ag	e:			
All offers of employment upon a pre-employment essential duties of the po	physical examination and drug	factory completion of a Health C g test, where required. Satisfactor ment. Satisfactory completion of	ory fitness to perform the		

XIII. Lie Detector Test

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.

XIV. Signature

CAREFULLY READ ALL PARTS OF THIS APPLICATION FORM BEFORE SIGNING.

- A. I understand that acceptance of this application by the Town of Plymouth does not imply that I will be employed.
- **B.** 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.
- **C.** I understand that any offer of employment that I receive from the Town of Plymouth is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Plymouth 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.
- **D.** In processing my application for employment, the Town of Plymouth 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.
- *E.* 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.
- **F.** I hereby release the Town, 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.
- **G**. If employed by the Town of Plymouth, 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 request a Criminal Offense Record Inquiry (CORI check) on me and/or Sexual Offender Information Inquiry (SORI check) on me, investigate my driving record or verify my license(s) or certification(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.
- **H**. I understand that the Town of Plymouth 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 Statements And All Statements Contained In This Application For Employment.

Applicant's Name (Please Print)	
Applicant's Signature Date	Date