



Town of Sudbury Employment Application

Human Resources Department, 278 Old Sudbury Road, Sudbury, MA 01776
Tel. (978) 639-3348 Fax (978) 443-0756

The Town of Sudbury is an Equal Opportunity Employer. The Town of Sudbury considers applicants for all positions without discrimination on the basis of race, color, religion, national origin, sex, age, physical or mental disability, sexual orientation, ancestry, marital status, veteran status, or any other legally protected status. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on any basis prohibited by local, state or federal law.

The Town of Sudbury accepts applications for advertised positions only. The Town does not maintain a file of general applications. Applications must be received at the above address by the advertised deadline in order to be considered.

A resume may be attached but not substituted for this form. All questions must be answered completely.

(Please Print or Type)

Position(s) applied for _____ Date _____

How did you learn about the position? _____

Full-time: ____ Part-time: ____ Temporary: ____ Date you are available to start: _____

Salary desired: _____

If hired, are you able to perform the essential functions of this position applied for, with or without reasonable accommodations? ____ Yes ____ No

PERSONAL INFORMATION:

Name: _____
(Last) (Middle Initial) (First)

Address: _____

E-mail Address: _____

Home Phone: () _____ Work Phone: () _____

Are you 18 years or older? ____ Yes ____ No

Only U.S. Citizens or other persons who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, submit documentation verifying your identity and legal right to work in the U.S.? ____ Yes ____ No

Have you ever been employed by the Town of Sudbury? ____ Yes ____ No

If Yes, when and in what capacity? _____

If Yes, reason for leaving? _____

Do you have a dependable means of transportation to and from work? ____ Yes ____ No

EDUCATION: (List all education relevant to the position (high school, college, technical school, etc.)

| School Name/Location | Years Completed | Degree/Date | Course of Study |
|-------------------------------------|-----------------|-------------|-----------------|
| High School: _____ | | | |
| College: _____ | | | |
| Graduate School: _____ | | | |
| Business/Technical/ Other: _____ | | | |

SPECIAL SKILLS:

Please describe any specialized training or job related skills that will help us evaluate your application for employment.

Specialized Training: _____
Special Equipment: _____
Professional Licenses: _____
Professional Memberships: _____
Computer Software: _____
Other: _____

EMPLOYMENT HISTORY: List current or most recent employer first.

Employer's Name: _____ From: _____ To: _____
Employer's Address: _____ Telephone: (____) _____
Job Title: _____ Salary (per year) or Earnings (per hour): _____
Work Performed: _____
Reason for Leaving: _____
Name and Title of Immediate Supervisor: _____
May we contact this Employer? ____ YES ____ NO

Employer's Name: _____ From: _____ To: _____
Employer's Address: _____ Telephone: (____) _____
Job Title: _____ Salary (per year) or Earnings (per hour): _____
Work Performed: _____
Reason for Leaving: _____
Name and Title of Immediate Supervisor: _____
May we contact this Employer? ____ YES ____ NO

Continue employment history on next page

Employer's Name: _____ From: _____ To: _____

Employer's Address: _____ Telephone: (____) _____

Job Title: _____ Salary (per year) or Earnings (per hour): _____

Work Performed: _____

Reason for Leaving: _____

Name and Title of Immediate Supervisor: _____

May we contact this Employer? ____ YES ____ NO

REFERENCES:

Please list three people (non-relatives) whom we may contact who are able to evaluate your professional knowledge and ability:

1. Name: _____ Occupation: _____

Address: _____ Telephone: _____

Relationship: _____ Years Acquainted: _____

2. Name: _____ Occupation: _____

Address: _____ Telephone: _____

Relationship: _____ Years Acquainted: _____

3. Name: _____ Occupation: _____

Address: _____ Telephone: _____

Relationship: _____ Years Acquainted: _____

APPLICANT'S STATEMENT:

"I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that if employed, any misrepresentation or false or misleading statements given in this application or in personal interview(s) may be sufficient grounds for discharge.

I authorize investigation of all statements contained herein and authorize the employer to contact and obtain all information that may be necessary to arrive at an employment decision from all listed references, employers and educational institutions. I understand that the information so obtained is for the use of the Town of Sudbury only. I hereby release all parties from any and all liability for any damages which may arise as a result of furnishing or releasing such information.

If required for the position I am seeking I agree to have a physical examination by a physician selected by the employer, which may include testing for drugs or a psychological examination and recognize that any offer of employment may be contingent upon the results of such examination(s).

I understand that neither this application nor any offer letter I may receive for employment constitutes an agreement or contract for employment for any specified period or definite duration. I understand that all appointments are probationary and that I must demonstrate my fitness for continued employment. I also understand and acknowledge that, unless otherwise defined by applicable law, employment is of an "at will" nature; i.e. that I may resign at any time for any reason and that the employer reserves the right to terminate my employment at any time with or without cause."

Signed: _____ Date: _____