



Town of Weston
 Town Hall, Town House Road
 Post Office Box 378, Weston, MA 02493-0002
APPLICATION FOR EMPLOYMENT

An Equal Opportunity/Affirmative Action Employer
 Applicants will be considered without discrimination on account of race, creed, color, sex,
 age, national origin, disability, veterans status, sexual orientation or genetic information.

PLEASE NOTE: The town accepts applications for advertised positions only. To assure that your application will be properly evaluated, please answer each question clearly, completely and accurately. If you need more space, please attach a separate sheet. PRINT or TYPE all answers except for your signature at the end of the application. You may attach a copy of your resume if one is available, but not as a substitute for responding to all of the questions. If you need additional information or if you need assistance with this application, please contact the Town of Weston Human Resources Department at (781) 786-5090.

Date _____

PERSONAL INFORMATION

Name: (last) _____ (first) _____ (middle) _____

Address: (street) _____

(City or town) _____ (state) _____ (zip) _____

Telephone Number: Home (____) _____ Social Security Number: _____

Telephone between 8:30 a.m. and 5:00 p.m.: (____) _____

If this is your current place of employment, may we contact you there? yes no

Emergency Notification: Name _____ Relationship _____

Telephone Number: (____) _____ Address: _____

Are you age 18 or older? yes no If less than 18, date of birth? _____

If less than 18 and you are offered employment, can you furnish a work permit? yes no

U.S. Citizen? yes no If no, have you legal authorization to work in the U.S.? yes no

(Under Federal Law, within three days of hire, you will be required to produce evidence of identity and legal authorization to work in the U.S.)

Have you served in the U. S. Armed Forces? yes no If yes, which branch? _____

Dates of military service: From _____ to _____

Have you worked for the Town of Weston before? yes no

Are you related to anyone employed, or formerly employed, by the Town of Weston? yes no

If yes, give name and relationship: _____

Referral Source: Self Newspaper School Weston employee (name? _____)
 Other? _____

Position desired: _____

Full time Part time Temporary Seasonal

EDUCATION AND TRAINING

School	Name, Address, State	# Years Attended	Degree
High School or Vocational School			
College			
Graduate School			
Trade/Business School			
Military Schooling, if any			
Other Courses?			

SKILLS AND CERTIFICATIONS

Please list all licenses you possess that relate to the position you seek. A valid license is a condition of employment, where required.

License	Yes/No	If yes, enter state of issue, number, and expiration date
Valid driver's license (Class D Auto)		
Valid CDL license (Class A or B)		
Valid Hydraulic license		
Other _____		

Computer and Related Skills: Please check the column that you believe best describes your ability.

Skill	Beginner	Intermediate Level	Advanced Level
Word Processing			
Spreadsheets			
Databases			
Graphics			
Web design			
Computer technology: Mainframe/network			
Bookkeeping			
Automated Accounting Systems			
Typing/keyboard			

OTHER: You may, if you wish, attach a separate sheet stating briefly why you wish to work for the Town of Weston, and describing any additional experiences, skills or abilities that you believe qualify you for the position you seek.

EMPLOYMENT HISTORY

Please account for the last 10 years including periods of unemployment and military. Start with your current employer. Include full-time and part-time employment, and any verifiable work performed as an intern or volunteer.

Employer:	Address:
Telephone: May we call now? ___yes ___no	Your title:
Supervisor	Dates worked
Salary received:	Reason for leaving:
Primary duties:	

Employer:	Address:
Telephone:	Your title:
Supervisor	Dates worked
Salary received:	Reason for leaving:
Primary duties:	

Employer:	Address:
Telephone:	Your title:
Supervisor	Dates worked
Salary received:	Reason for leaving:
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Employer:	Address:
Telephone:	Your title:
Supervisor	Dates worked
Salary received:	Reason for leaving:
Primary duties:	

References (other than relatives):

Name	Address	Telephone number	Relationship

PLEASE READ CAREFULLY:

1. The information that I have provided is true and complete. I understand that misrepresentation or omission of any relevant 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 I am employed.
2. I understand that any offer of employment that I receive from the Town of Weston is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Weston receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry (“CORI check”), and if appropriate, post-offer pre-employment drug test, physical examination, or psychological screening.
3. I understand that the Town of Weston 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.
4. I authorize the Town of Weston to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting individuals listed as business, educational or personal references, and by contacting other individuals to provide or further clarify information about me.
5. I hereby release all of those persons, employers, references, academic institutions and law enforcement agencies from any and all liability arising from their giving and receiving information about my employment history, academic credentials, qualifications or criminal record in connection with my application for employment in the Town of Weston.
6. If I am employed by the Town of Weston, I understand that as a condition of continued employment I may be required to furnish additional or updated medical information, that I may be required to undergo a physical or psychological examination, that I may be subject to drug and/or alcohol testing, that the Town of Weston may request a CORI and 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.
7. I understand that nothing in this employment application, in the Town’s statements of personnel policies or guidelines or in my communication with any Town employee or official is intended to create an employment contract between the Town and me other than an applicable collective bargaining agreement.
8. I understand that the Town of Weston is an at-will employer, which means that if employed, my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.
9. It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment. An employer who violates this law shall be subject to criminal penalties and civil liabilities.

My signature below certifies that I have read and agree with the above statements and all statements contained in this Application for Employment.

Applicant Name (Please print)

Applicant Signature

Date