

TOWN OF OXFORD
APPLICATION FOR EMPLOYMENT

Applicants for employment are considered without regard to race, color, religion, sex, marital status, national origin, age as defined by law, handicap or sexual orientation. Also, 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.

(PLEASE PRINT)

Date of Application _____

Position(s) Applying for _____

Referral Source: AD ___ Friend/Relative ___ Walk In ___ Employment Agency ___ Other ___

NAME:

Last

First

Middle

Residence:

Number

Street

City

State

Zip

Mailing Adr:

Number

Street

City

State

Zip

Home phone: _____

Cell/Mobile phone: _____

Are you under 18? Yes ___ No ___

("Employment permits" are required for employees 14 to 15 years of age)

("Education certificates" are required for 16 and 17 year olds)

Have you filed an application here before?

Yes ___ No ___

If yes, give date _____

Have you ever been employed here before?

Yes ___ No ___

If yes, give date _____

Are you employed now?

Yes ___ No ___

If yes, may we contact your present employer?

Yes ___ No ___

Do you have any relatives currently employed by the Town?

Yes ___ No ___

If yes, name: _____ Relationship: _____

Are you lawfully entitled to work in the Unites States? Yes ___ No ___

(All new employees will be required to complete an I-9 form and to prove that they are lawfully eligible to work in the United States)

On what date would you be available for work? _____

Are you available to work Full Time ___ Part Time ___ Shift Work ___

Temporary ___ Overtime ___

Are you on a lay-off and subject to recall? Yes ___ No ___

Can you travel if job requires it? Yes ___ No ___

THE TOWN OF OXFORD IS AN AFFIRMATIVE ACTION EQUAL OPPORTUNITY EMPLOYER

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and any verified work performed on a volunteer basis. Exclude organization names which indicate race, color, religion, sex, sexual orientation or national origin.

Employers:		Dates Employed	Work Performed
Address:		From:	
Job Title:		To:	
Supervisor:		Hourly Rate/Salary (Optional)	
Reason for leaving		Start:	
		Final:	
Employers:		Dates Employed	Work Performed
Address:		From:	
Job Title:		To:	
Supervisor:		Hourly Rate/Salary (Optional)	
Reason for leaving		Start:	
		Final:	
Employers:		Dates Employed	Work Performed
Address:		From:	
Job Title:		To:	
Supervisor:		Hourly Rate/Salary (Optional)	
Reason for leaving		Start:	
		Final:	
Employers:		Dates Employed	Work Performed
Address:		From:	
Job Title:		To:	
Supervisor:		Hourly Rate/Salary (Optional)	
Reason for leaving		Start:	
		Final:	

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

Special Skills and Qualifications:

Summarize special skills and qualifications acquired from employment or other experience.

SEALED RECORD NOTICE

An applicant with a sealed record on file with the Commissioner of Probation may answer "NO RECORD" with respect to an inquiry herein relative to prior arrests, criminal court appearance or conviction. An application for employment with a sealed record on file with the Commissioner of Probation may answer "NO RECORD" to an inquiry here in relative to prior arrests or criminal court appearances.

An applicant may answer "NO RECORD" with respect to an inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.

With respect to the above-mentioned exceptions, applicants with sealed records on file may answer "NO RECORD" to the following questions:

Within the past five years, have you been convicted of a misdemeanor or felony? Yes ____ No ____

If yes, please explain _____

Veteran of the U. S. Military Service: Yes ____ No ____

If yes, branch? _____

Please describe any special skills or training acquired while in the service. _____

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers:

