Massachusetts

APPLICATION FOR EMPLOYMENT

Date:

We are committed to a policy of Equal Employment Opportunity and will not discriminate on any legally recognized basis, including but not limited to, race, age, color, religion, sex, marital status, national origin, citizenship, ancestry, physical or mental disability or veteran status.

PERSONAL BACKGROUND

Name				
Last	First	Middle		
Present Address				
Street	City		State	Zip Code
Permanent Address	S			
Street	City		State	Zip Code
Phone No.		Ema	ail Address:	
Referred By:				
Position Applying	For:		Date You Can	Start
Full Time:	Part Time:	Specify Hours:	Salary Desired	d:
Are you employed?	?	If so, may we inquire of	your present employe	er?
Ever applied to this	s company before?	Where:	When	:
Are you willing to	work overtime? Yes:	No:		
If driving is a requi	irement of the job for v	vhich you are applying, do	o you have a valid dri Yes:	ver's license? No:
If you are a minor,	can you produce the w	vork certificate necessary	to obtain employmen Yes:	? No:

Educational Background	Name and Location of School	Underline Highest Grade Completed	Major Area of Study
High School From: To:		9 10 11 12/ GED	
College From: To:		1 2 3 4	
Trade, Business or Graduate School From: To:			

Specialized technical skills (i.e., computer programmi	ng/ languag	e, software,	equipment	operation,	special
tools or machines)					

Work Experience

(Please list below your last four employers, starting with your present or last place of employment.) You may include any verifiable work performed on a volunteer basis, internship or military service.

Date Mo/Yr	Name, Address and		Name of	Reason
Position	Phone # of Employer	Salary	Supervisor	for Leaving
From:				
To:				
Pos:				
From:				
To:				
Pos:				
From:				
To:				
Pos:				
From:				
To:				
Pos:				

Lie Detector Notice

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.

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Applicant's Signature:

Give the names of three additional work-related references whom we may call. Please do not list relatives. Individuals with no prior work experience may list school- or volunteer- related references.

Name & Position	Company	Telephone Number
1.		
2.		
3.		
Applicants Statement		
means my employment with the co		
	regulations of the company, and I un rules and regulations at any time, e	
	e and true to the best of my knowled my part of the facts in this application	ge. I understand that any n may result in immediate dismissal.
	any investigation necessary concern g. I release all parties from any liabi	ing any part of my background lity in connection with the provision

Date: