



TOWN OF EDGARTOWN
APPLICATION FOR EMPLOYMENT

Date _____

Social Security Number _____

Name _____
Last First Middle Are you over 18? _____

Position Desired _____ Department _____

Permanent Address _____
Street City State

Island Address _____

Permanent Phone Number _____ Island Phone Number _____

Have you been convicted of a misdemeanor within the last five years or a felony within the last ten years? _____

If yes, please explain _____

Date you can start work _____

Are you employed now? _____ May we inquire of your present employer? _____

Have you ever worked for the Town of Edgartown? _____

If yes, what department and position? _____ Dates _____

Reason for leaving _____

EDUCATION RECORD

	Name and Location	Dates	Course
Grammar School	_____	_____	_____
High School	_____	_____	_____
College	_____	_____	_____
Graduate School	_____	_____	_____
Technical/Trade School	_____	_____	_____
Business/Corresp.	_____	_____	_____
Other	_____	_____	_____

MILITARY RECORD

Date Entered	Discharged	Branch	Highest Rank	Special School
_____	_____	_____	_____	_____

EMPLOYMENT RECORD

Firm Name and Address	Job Title	Dates	Reason for leaving
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Trade or Other Qualified Skills _____

Office Machines You Can Operate If Applicable _____

List License or Certificates (Driver's Fireman, Professional, Engineer, etc.) _____

REFERENCES - Names of three not related to you and not your prospective employer

Name	Address	Position
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Have you ever claimed compensation for any injury or disability? If yes, please explain _____

Applicant read carefully before signing.

I authorize investigation of all statements contained in this application (except where noted above.) I also understand that my employment is conditioned upon the satisfactory completion of a pre-employment physical examination paid for by the Town and administered upon recommendation for my employment.

Date _____ Signed _____

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.