



TOWN OF KINGSTON

Town House, 26 Evergreen Street, Kingston, Massachusetts 02364

personnel@kingstonmass.org, Fax: 781-585-0534, www.kingstonmass.org

Employment Application

The Town of Kingston recognizes the right of an individual to work and to advance on the basis of merit, ability and potential without regard to race, color, disability, religious creed, national origin or ancestry, age, military status, sexual orientation, genetic information, gender identity, gender expression, marital status, gender, or political affiliation. If you require special accommodation in order to apply for this position, please notify the Human Resources Office prior to the deadline for submitting applications.

PERSONAL INFORMATION		Date of Application: / /	
How did you hear of this position opening?			
Position Applying for & Department:		Desired Annual Salary:	
Full Name (first middle last):			
Address (street/city/state/zip):			
Home Phone:	Cell Phone:	Email Address:	
Have you ever been employed with the Town of Kingston before? NO () YES ()			
Title of Position Held:		Separation Date:	
List relatives or friends who currently work for the Town of Kingston			
Name	Department	Relationship	
Can you provide proof that you are eligible to work in the United States, in accordance with the Immigration Reform and Control Act? NO () YES ()			
If you are under 18 years old, can you provide required proof of your eligibility to work? NO () YES ()			
Have you applied for employment with the Town within the last 5 years? NO () YES ()			
If YES, give dates and position(s):			

REFERENCES	Provide 3 professional references who are not friends or relatives			
Name & Title	Email Address	Phone Number	Relationship	Company

EDUCATION	Highest grade completed: 5 6 7 8 9 10 11 12					College: 1 2 3 4 5 6 6+				
	School (name, city, state)		Diploma/Degree			Course of Study				
High School/GED										
Undergraduate										
Graduate										
Other Education										

LICENSES & CERTIFICATIONS			
License Type	Expiration Date	Issuing State	License #
Indicate any specialized training you have received:			

EMPLOYMENT HISTORY Please list your most recent employer first & account for any gaps	
Company:	
Full Address:	
Position:	
Start Date:	End Date: or Currently Employed? Y N
Responsibilities:	
Supervisor's Name:	
Phone Number:	EMAIL Address:
Reason for Leaving:	
May we contact your present employer? Yes No After Interview Only	

Company:	
Full Address:	
Position:	
Start Date:	End Date:
Responsibilities:	
Supervisor's Name:	
Phone Number:	EMAIL Address:
Reason for Leaving:	May we contact this employer? Yes No

Company:	
Full Address:	
Position:	
Start Date:	End Date:
Responsibilities:	
Supervisor's Name:	
Phone Number:	EMAIL Address:
Reason for Leaving:	May we contact this employer? Yes No
IF NEEDED PLEASE ATTACH ADDITIONAL SHEETS TO INCLUDE ADDITIONAL EMPLOYMENT	

CERTIFICATION AND AGREEMENT

PLEASE READ CAREFULLY BEFORE SIGNING

I understand that acceptance of this application by the Town of Kingston does not imply that I will be employed. The information that I have provided is true and complete. I understand that misrepresentation or omission of any 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 employed.

I understand that any offer of employment that I receive from the Town of Kingston is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Kingston receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry if required, satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination.

In processing my application for employment, the Town of Kingston 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. I authorize the Town to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting my present and former employers, by contacting individuals listed as business, educational or personal references, and by contacting other individuals to provide or further clarify information about me.

I hereby release my present and former employers and all individuals contacted for factual information about me from any and all liability for damages arising from furnishing the requested information.

If employed by the Town of Kingston, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to undergo a physical examination, that I may be subject to drug and/or alcohol testing, that the Town may require a Criminal Offense Record Inquiry (CORI check) on me, investigate my driving record or verify my license(s) or certifications(s) as required for employment at any time during my employment. As a condition of employment an employee may be required to provide additional or updated information, and may require both drug testing and an employment physical in order to allow us to have the necessary information for making a proper decision or reasonable accommodations, if necessary.

It is illegal to administer a lie detector test (MGL c. 149 s 19(2)(b)).

I understand that the Town of Kingston is an at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.

My signature certifies I have read, understand, and agree with the above statement and all statements contained in this employment application.

Applicant's Signature:

Applicant Print Name:

Date:

The Town of Kingston is an Affirmative Action/Equal Opportunity Employer