TOWN OF WEYMOUTH

HUMAN RESOURCES DEPARTMENT

APPLICATION FOR EMPLOYMENT					
Full Name: Last	First M.I Date:				
	•				
Address:	Apt/Unit #				
City	State Zip Code				
Phone: ()	E-mail Address: Are you able to perform the essential functions YES NO				
Position Applied for:	of the job that you are applying for?				
Are you a citizen of the United States?	If no, are you authorized to work in the U.S.?				
Have you ever worked for the Town of YES NO Weymouth?	If yes, when?				
EDUCATION					
High School:					
Address	Did you YES NO				
	graduate?				
College:	Did you YES NO				
Address	graduate? Degree:				
Other:	Did you YES NO				
Address	graduate? Degree:				
PREVIOUS EMPLOYMENT					
Company:	Phone: ()				
Address:	Supervisor:				
Job Title:	Ending Salary \$				
Responsibilities:					
From: To:	Reason for Leaving: May we contact supervisor for a reference? Yes No				
Company:	May we contact supervisor for a reference? Tes No				
Address:	Supervisor:				
Job Title:	Ending Salary: \$				
Responsibilities:					
From: To:	Reason for Leaving May we contact supervisor for a reference? Yes No				
Company:	Phone: ()				
Address:	Supervisor:				
Job Title:	Ending Salary\$				
Responsibilities:					
From: To: :	Reason for Leaving May we contact supervisor for a reference? Yes No				

LICENSES & CERTIFICATIONS				
Type:	Number:		Expiration date:	
REFERENCES WILL BE REQ	UESTED DURING	3 THE INTERVIEW ST	TAGE	
MIL	LITARY SERVICE			
Branch:	From:	То:		
Rank at Discharge:	Type of [Discharge:		
If other than honorable, explain:				
	CORI NOTICE			
All candidates considered for employment must have a Codetermining eligibility for employment.	ORI check complet	ed. Results from this Co	ORI can be used in	
	DISCLAIMER			
Additional Information – Please read carefully before significant	ng.			
 I certify that my answers are true and complete to the to the total state of the st	nat false or mislead nt. upon my successfor references, a satistic on(s) (where required permation related to and former employed employer. If employed	ling information in my apul completion of the pre- sfactory criminal history is ed) and successful pre-emy application for employers.	employment inquiry, employment drug oyment including ny employment	
My signature certifies that I have read and agree with t	the above statemer	nts in this application for	employment.	
Applicant signature	Date			