

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or amy other legally protected status.

*** PLEASE PRINT CLEARLY ***

Position(s) applying for			Date	
How did you find out about this job? Newspa	aper Employee	Walk-In	Relative	Other
Whay are you seeking a job at this time?				
	APPLICANT INFORM	ATION		
First Name	Middle	Last_		
Street Address	Social	Security #		
City/State/Zip	Phone	#		
If hired, do you have a reliable means of trans	portation to get to work?	Describe_		
If you are under 18 years of age, can you furn	ish a work permit?			
If the job you are applying for requires driving:	Driver's License #	State	e Exp	o. Date
Are you legally eligible for employment in the	US? (Proof of US	S citizenship or imm	igration status i	s required if hired
Are you a veteran? If	yes, provide dates of service	e		
List any special skills or training				
	EMPLOYMENT INFOR	MATION		
Are you seeking full-time, part-time, or tempor	ary employment			
What hours and shifts are you available to wo	rk?			
What times are you unavailable to work?				
Are you willing to work weekends?	Holidays?		Overtime?	
Are you currently employed?	If hired, when can you	start?		
Have you ever worked for this company before	e? If <u>;</u>	yes, name used?		
List any friends or relatives employed by this of	company:			

EDUCATION (circle the highest level)

ELEMENIARY 1 2 3 4 5 6 7 8		ONDARY 0 11 12 GED	COLLEGE 1 2 3 4 5 6 7 8
Name of School	Name	e of School	Name of School
Location		tion	Location
If in high school, are you enrolled in re	cognized co-op	program(s)?	
If yes, please identify schools and pro-	grams		
If a college graduate, please list Degre	e, Major and Mi	nor:	
W	ORK HISTO	RY (begin with the mos	t recent)
Company			Phone
Address		City/State/Zip	
Job Title			
Dates of Employment: From	To	Salary: Beginning	Ending
Describe Duties briefly			
Specific reason for leaving			
Company			Phone
			FIIONE
Job Title			Ending
Describe Duties briefly			
Out of the second for the section			
Company			Phone
Address		City/State/Zip	
Job Title			
Dates of Employment: From	To	Salary: Beginning	Ending
Describe Duties briefly			
information as may be obtained shall be reported to the authorize any other government agency or courts have closed, or any other pertinent data, and to permit the linformation. I hereby release, discharge and exoner	ne appointing authority, ing control of any doculoudley Police Departmente the Dudley Police Enspection of such doc	and I agree to provide any further informa ments, records and files regarding change ent or any of its agents or representatives Department, it's agents or representatives, uments, records and other information or i	sachusetts Board of Parole records check. I understand that any tion which may be required in reference to my past record. I also s or complaints filed against me, formal or informal, ending or to inspect or make copies of such documents, records or other and any person so furnishing information from any and all liability nvestigation made by or on behalf of the Dudley Police Departled.

Signature_____ Date_____