



Town of North Reading  
235 North St  
North Reading MA 01864  
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## EMPLOYMENT APPLICATION

**Please read this before filling out this application.**

The Town of North Reading does not illegally discriminate in hiring or employment and, in compliance with the Federal and State laws, equal opportunity will be afforded to all applicants regardless of race, color, sex, age, religious creed, disability, national origin, ancestry, sexual orientation, marital status, military status or any other legally protected status. No question in this application is intended to secure information to be used for such discrimination.

All questions should be answered clearly, completely and accurately in your own handwriting. If you need more space, please attach a separate sheet. Please print legibly and use ink.

### PERSONAL INFORMATION

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Number Street City/Town State Zip Code

Mailing Address: \_\_\_\_\_  
(If different) PO Box or Street Address City/Town State Zip Code

Home Telephone (Area Code + Number): \_\_\_\_\_ Cell Phone (Area Code + Number): \_\_\_\_\_  
( ) ( )

Email Address: \_\_\_\_\_ Date Available to start: \_\_\_\_\_

Position(s) desired: \_\_\_\_\_

How were you referred to the Town of North Reading: \_\_\_\_\_

If you are hired and are under the age of 18, can you furnish a work permit? ☐ Yes ☐ No

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Are you a veteran of the United States military? ☐ Yes ☐ No  
If yes, what was your type of discharge and date? \_\_\_\_\_

Have you filed an application with the Town of North Reading before? ☐ Yes ☐ No

- If yes, please list all dates and positions applied for:

\_\_\_\_\_

- Have you ever been employed by the Town of North Reading before? ☐ Yes ☐ No

- If yes, please list dates and department(s):  
\_\_\_\_\_

Availability (Please "X" all days/shifts you are available to work)

Days: S ☐ M ☐ T ☐ W ☐ TH ☐ F ☐ S ☐ Shifts: Day ☐ Evening ☐ Overnight ☐

Are you employed now? ☐ Yes ☐ No

May we contact your present employer? ☐ Immediately ☐ After acceptance of employment ☐ No

If no, please give reason: \_\_\_\_\_

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## EMPLOYMENT EXPERIENCE

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Start with your most recent position and account for all periods of time. You may include volunteer positions, internships, and/or military experience. If you are including a copy of your résumé, you may attach it and leave this section blank.

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### #1

Employer: \_\_\_\_\_ Dates employed: From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title \_\_\_\_\_ Work Performed \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason of Leaving: \_\_\_\_\_

### #2

Employer: \_\_\_\_\_ Dates employed: From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title \_\_\_\_\_ Work Performed \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason of Leaving: \_\_\_\_\_

### #3

Employer: \_\_\_\_\_ Dates employed: From: \_\_\_\_\_ To: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title \_\_\_\_\_ Work Performed \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason of Leaving: \_\_\_\_\_

If you need additional space, please continue on a separate sheet of paper.

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## EDUCATION / QUALIFICATIONS

| School   | Name, City, State | Course of Study | Years Completed | Diploma, Certificate, or Degree |
|--|-------------------|-----------------|-----------------|---------------------------------|
| High School or Equivalent  |                   |                 |                 |                                 |
| College or University  |                   |                 |                 |                                 |
| Graduate School  |                   |                 |                 |                                 |
| Military Information (Optional)  |                   |                 |                 |                                 |
| Additional Training or Skills (Computer, Special License(s), Language Fluency, etc.) |                   |                 |                 |                                 |
| Professional Affiliations  |                   |                 |                 |                                 |

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## PROFESSIONAL REFERENCES

Please list below the name of three professional or work-related references.

|   |  |                     |
|---|--|---------------------|
| Name                                    | Position                                     | Relationship to you |
| Phone (Area Code + Number)<br>(       ) | Cell Phone (Area Code + Number)<br>(       ) | E-Mail Address      |

|   |  |                     |
|---|--|---------------------|
| Name                                    | Position                                     | Relationship to you |
| Phone (Area Code + Number)<br>(       ) | Cell Phone (Area Code + Number)<br>(       ) | E-Mail Address      |

|   |  |                     |
|---|--|---------------------|
| Name                                    | Position                                     | Relationship to you |
| Phone (Area Code + Number)<br>(       ) | Cell Phone (Area Code + Number)<br>(       ) | E-Mail Address      |

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**APPLICANT'S STATEMENT - Please read before signing:**

**NOTE:** If you have any questions regarding the following statement, please ask the Human Resources Director before signing.

I understand that neither the receipt of this application nor the granting of an interview implies that I will be employed.

I certify that answers given herein (and on any accompanying résumé) are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application (and on any accompanying résumé) for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. The applicant understands that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and employee in writing and that employment is for no stated term and may be terminated by me or the Town of North Reading at any time. I understand that any offer of employment is conditioned upon satisfactory replies from my references, a favorable pre-employment physical and/or drug screen and/or a CORI if applicable.

I understand that any false or misleading information given in my application (and on any accompanying résumé) or interview(s), or material omission of fact, may disqualify me from further consideration for employment and may be grounds for termination of employment in the event I am hired. I understand, also, that I am required to abide by the regulations of the Town of North Reading.

**CORI REQUESTS**

The Human Resources Director has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. A CORI may be required for this desired position. In the event that a CORI is necessary, a form will be mailed to you at a later time.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**AUTHORIZATION**

I authorize persons, schools, current employers (if applicable) and previous employers and organizations named in this application (and accompanying resume, if any) to provide the Town of North Reading with any relevant information which may be required to arrive at an employment decision, and I voluntarily release such persons, schools, employers, and organizations from all liability which might result from their providing such information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

For office use only:

|                          |          |
|--------------------------|----------|
| Application received by: | Date:    |
| <br><br>                 | <br><br> |