



TOWN OF CHESTER

15 Middlefield Road
Chester, MA 01011
413-354-7760 Fax: 413-354-2268
Selectmen@comcast.net

MUNICIPAL EMPLOYMENT APPLICATION

Applicants who need an accommodation in the application or interview process are asked to make a request by contacting the TOWN OF CHESTER Selectman's Office.

I. Personal Data

Date of Application: _____

Name _____
(Print) LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP

Home Phone () _____ Other Phone () _____

Email Address: _____ Last four digits of Social Security Number _____

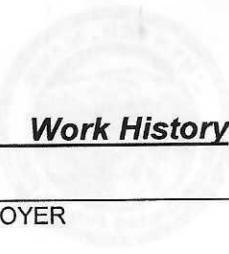
Date available for employment: _____

Are you a United States citizen or do you have an entry permit which allows you to lawfully work in the U.S.?
____ Yes ____ No

II. Educational Preparation and/or Training

HIGH SCHOOL, COLLEGE, UNIVERSITY (MOST RECENT FIRST)

NAME OF SCHOOL		LOCATION		# OF YRS. COMPLETED
MAJOR:	MINOR:	DID YOU GRADUATE?	DEGREE:	
NAME OF SCHOOL		LOCATION		# OF YRS. COMPLETED
MAJOR:	MINOR:	DID YOU GRADUATE?	DEGREE:	
NAME OF SCHOOL		LOCATION		# OF YRS. COMPLETED
MAJOR:	MINOR:	DID YOU GRADUATE?	DEGREE:	



III. Work History

EMPLOYER _____ FROM: _____ TO: _____ ()
Mo/Yr. Mo/Yr. TELEPHONE NO.

ADDRESS _____ CITY _____ STATE _____ ZIP _____

POSITION _____ REASON FOR LEAVING _____

SUPERVISOR _____ SUPERVISOR TITLE _____

EMPLOYER _____ FROM: _____ TO: _____ ()
Mo/Yr. Mo/Yr. TELEPHONE NO.

ADDRESS _____ CITY _____ STATE _____ ZIP _____

POSITION _____ REASON FOR LEAVING _____

SUPERVISOR _____ SUPERVISOR TITLE _____

EMPLOYER _____ FROM: _____ TO: _____ ()
Mo/Yr. Mo/Yr. TELEPHONE NO.

ADDRESS _____ CITY _____ STATE _____ ZIP _____

POSITION _____ REASON FOR LEAVING _____

SUPERVISOR _____ SUPERVISOR TITLE _____

IV. Other Skills/Proficiencies

Word processing		Databases	
Spreadsheets		Access	
Conducting Interviews		Conducting Training	

List any computer software programs with which you are proficient:

V. References (please omit relatives)

NAME	POSITION	ADDRESS	PHONE NO.

VI. Personal Statement

Include your experience, talents, or special interests, which in your estimation will contribute to your success in the position for which you are making application

An **active** application file consists of the following documents:

- Completed Application
- Cover Letter
- Resume
- Transcripts from colleges/universities attended (photocopies are acceptable)

The TOWN OF CHESTER, as a prerequisite to employment, requires a certificate of good health signed by a physician (Physical Report), and may conduct a criminal information records check.

As part of the application process TOWN OF CHESTER may conduct a criminal information records check. (A criminal record does not constitute an automatic bar to employment and will be considered only if the circumstances of the conviction relate to the circumstances of the particular job for which you are being considered.)

Have you ever been convicted of an ordinance violation (other than minor traffic violations), misdemeanor, or felony?
_____ Yes _____ No

If yes, please attach a confidential letter explaining the offense(s) including date, location of court, etc.

Please read the following statements carefully before signing your name.

I understand that this application will remain active for six months. After six months, if I am still interested in a position with TOWN OF CHESTER, it will be necessary for me to complete a new application or notify the Human Resources Office that I would like to re-activate my original application.

RELEASE

I HEREBY CERTIFY that the answers given to the above questions and statements are true and correct and hereby authorize you to contact references, past or present employers, schools, law enforcement agencies, and other sources of information which may be relevant to my application for employment. In consideration of the TOWN OF CHESTER review of this application, I release from all liability and/or legal claims the TOWN OF CHESTER and every person seeking or providing information, whether it is oral or written. A photocopy and/or electronic version of this release shall be as valid as the original and may be relied upon by all persons providing information. It is understood and agreed that any misrepresentation, false statement, or omissions by me in this application will be sufficient reason for rejection of my application or for dismissal at any time during my employment without liability to TOWN OF CHESTER. I have read, understand, and agree to the above statements. (Sign below).

As part of the hiring process, applicants who receive an offer of employment may be asked to submit to a screening test to detect the presence of drugs (marijuana, opiates, cocaine, amphetamines, phencyclidine (PCP)) or their metabolites. Offers of employment are conditioned on a negative result. If you are asked to submit to a drug test and you refuse to be tested, or you do not pass, the town will revoke any offer of employment. All drug tests will be conducted in accordance with applicable federal and state law and may be done through saliva drug testing. Therapeutic levels of medically-prescribed or over-the-counter medicines may lead to positive test results.

Date

Applicant Signature

An Equal Opportunity Employer