

# APPLICATION FOR EMPLOYMENT – TOWN OF ANDOVER

## (PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

THE TOWN OF ANDOVER WILL NOT, EXCEPT IN TIM CASE OF A BONA FIDE OCCUPATIONAL QUALIFICATIONOR NEED, OR EXCEPT AS OTHERWISE PERMITTED OR REQUIRED BY LAW, DISCRIMINATE.ON THE RASIS OF RACE, COLOR, RELIGIOUS CREED, AGE, .SEX, MARITAL STATUS, SEXUAL ORIENTATION, NATIONAL. ORIGIN, ANCESTRY, PAST OR PRESENT HISTORY- OF MENTAL DISORDER, MENTAL RETARDATION, LEARNING DISABILITY OR PHYSICAL DISABILITY, WITH RESPECT TO HIRING, COMPENSATION, PROMOTION, DISCHARGE FROM EMPLOYMENT OR OTHER TERMS AND CONDITIONS OF EMPLOYMENT.

PERSONAL INFORMATION				DATE	
NAME: (Last, First, Middle)					
Current Address:					
Permanent Address:					
Phone No:					
ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? 0 YES      0 NO					
EMPLOYMENT DESIRED			Position:		
Date you can start:			Salary Desired:		
Are you employed now?			If so, may we inquire of your present employer?		
Ever applied before?			When:		Referred By:
EDUCATION	Name and Location of School	No. of yrs attended	Did you graduate?	Subjects Studied	
Grammar School					
High School					
College					
Trade, <i>Business</i> or Correspondence School					
GENERAL					
Subjects of Special Study or Research Work:					
Special Skills:					
Activities: (Civic; Athletic, Etc.) Exclude Organizations, the name of which indicates the race, creed, sex, age, marital status, color or nation of origin of its members:					
U.S. Military or Naval Service:			Rank:		

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(CONTINUED ON OTHER SIDE)

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST.)			
Date (Month & Year)	Name & Address of Employer	Position	Reason for Leaving
Which of these jobs did you like best?			
What did you like most about this job?			
REFERENCES: GIVE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT' LEAST ONE YEAR.			
Name	Address	Business	Years Acquainted
1.			
2.			
3.			

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause."

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE	
Interviewed by:	Date:
Remarks:	
Neatness: _____	
Hired:    0 Yes   0 No	Position:                      Dept
Salary/Wage:	Date Reporting to Work:
Approved: (Dept. Head)	
Approved: (General Manager)	