APPLICATION FOR EMPLOYMENT – TOWN OF ANDOVER
(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

THE TOWN OF ANDOVER WILL NOT, EXCEPT IN THE CASE OF A BONA FIDE OCCUPATIONAL QUALIFICATION OR NEED, OR EXCEPT AS OTHERWISE PERMITTED OR REQUIRED BY LAW, DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGIOUS CREED, AGE, SEX, MARITIAL 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.

<table>
<thead>
<tr>
<th>PERSONAL INFORMATION</th>
<th>DATE</th>
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<tbody>
<tr>
<td>NAME: (Last, First, Middle)</td>
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<tr>
<td>Current Address:</td>
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<tr>
<td>Permanent Address:</td>
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<td>Phone No:</td>
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ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? □ YES □ 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, Business 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: |

Revised 12.12.18

(CONTINUED ON OTHER SIDE)
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.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Business</th>
<th>Years Acquainted</th>
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<tbody>
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<td>1.</td>
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<td>3.</td>
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"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)

Revised 12.12.18