



CITY OF NORTH ADAMS, MASSACHUSETTS

EMPLOYMENT APPLICATION

APPLICANT INFORMATION												
Last name					First			M.I.		Date		
Street address								Apartment/Unit #				
City					State			Zip				
Phone					E-mail address							
Date available			Are you 18 or older?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If you are not over 18, please provide DOB						
Position applied for						Desired salary						
Have you ever worked for the city?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, when?									

EDUCATION										
High School					Address					
From		To		Did you graduate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Degree/major/field of study			
College					Address					
From		To		Did you graduate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Degree/major/field of study			
Other					Address					
From		To		Did you graduate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Degree/major/field of study			

EMPLOYMENT HISTORY – Please provide details of your three most recent jobs										
Company					Phone					
Address					Supervisor					
Job title				Starting salary	\$			Ending salary	\$	
Responsibilities										
From		To		Reason for leaving						
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>										

EMPLOYMENT HISTORY <i>continued</i>									
Company							Phone		
Address							Supervisor		
Job title			Starting salary		\$		Ending salary		\$
Responsibilities									
From		To		Reason for leaving					
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>									
Company							Phone		
Address							Supervisor		
Job title			Starting salary		\$		Ending salary		\$
Responsibilities									
From		To		Reason for leaving					
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>									

REFERENCES - <i>Please provide three professional references</i>									
Full name							Relationship		
Company							Phone		
Address									
Full name							Relationship		
Company							Phone		
Address									
Full name							Relationship		
Company							Phone		
Address									

MILITARY SERVICE											
Branch							From			To	
Rank at discharge							Type of discharge				
If other than honorable, explain											

DISCLAIMER, CERTIFICATION, AND SIGNATURE									
The City of North Adams is committed to a policy of Affirmative Action in providing equal employment opportunities to all City employees and applicants for employment. I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.									
Signature							Date		