



# Town of Wrentham Application for Employment

Thank you for your interest in employment with the Town of Wrentham. The Town is an Equal Opportunity/Affirmative Action Employer. We assure you that your opportunity for employment with the Town will be based only on your merits, without regard to race, religion, sex, age national origin or disability.

**PLEASE NOTE:** The Town accepts applications for advertised positions only. Applications must be returned to the address below by the advertised deadline for consideration.

**INSTRUCTIONS:** Each question should be fully and accurately answered. A separate application must be submitted for each position for which you are applying. Please fill out the form, then print, sign and mail or email to:

TOWN OF WRENTHAM, HUMAN RESOURCES DEPARTMENT  
79 SOUTH STREET  
WRENTHAM, MA 02093  
[HR@wrentham.ma.us](mailto:HR@wrentham.ma.us)

GENERAL		
Position applying for (as listed on job posting):		
<b>Referral Source</b> <input type="checkbox"/> Town Website <input type="checkbox"/> Indeed.com <input type="checkbox"/> MMA.org <input type="checkbox"/> Print Newspaper: _____ <input type="checkbox"/> Current Employee: _____ <input type="checkbox"/> Other Source: _____		
Date Available for work:		
PERSONAL INFORMATION		
<b>Name:</b>		
_____	_____	_____
Last	First	Middle
<b>Address:</b> _____		
_____		
<b>Telephone:</b> _____	<b>Email:</b> _____	



**Town of Wrentham – Application for Employment**

<b>Military History</b>			
Are you a veteran of the U.S. Armed Forces?		YES	NO
Branch:		Dates of Service:	
Rank at Discharge:		Discharge Status:	

<b>Employment Status</b>					
If hired, can you provide proof of citizenship or legal right to work?				Yes	No
Are you UNDER 18 years of age?	Yes	No	If yes, DOB:	____ / ____ / ____	
Do you have a valid Massachusetts driver's license?				Yes	No
Have you ever been employed with the Town of Wrentham before?				Yes	No
If yes, specify dates:		Dept:		Position:	

<b>Education/Training</b>					
	Name/Location	Concentration/Major	Certificate/Degree	Graduated?	
<b>High School</b>				YES	NO
<b>Vocational School</b>				YES	NO
<b>Undergraduate College</b>				YES	NO
<b>Graduate College</b>				YES	NO

Please describe any specialized training or job related skills that you have that will help us evaluate your application for employment:



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Employment History (please list most current position first)				
Employer's name: <i>(Current or Most Recent)</i>				
Address:				
Dates of Employment:		TO:		
Position Title:				
Reasons for Seeking other employment:				
Immediate Supervisor:		May we contact this employer?:	YES	NO
Phone/Email:				

Employer's name:				
Address:				
Dates of Employment:		TO:		
Position Title:				
Reasons for Seeking other employment:				
Immediate Supervisor:		May we contact this employer?:	YES	NO
Phone/Email:				

Employer's name:				
Address:				
Dates of Employment:		TO:		
Position Title:				
Reasons for Seeking other employment:				
Immediate Supervisor:		May we contact this employer?:	YES	NO
Phone/Email:				



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References		
Please provide three (3) PROFESSIONAL references. References should be former supervisors who can comment on your past job performance. You will be notified before references are contacted.		
Name, Title, Employer	Address	Email/Phone
1)		
2)		
3)		

Please review the functions of the position as outlined in the job description. Are you able to perform all of the essential duties of the position for which you are applying?	YES	NO
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Applicants Certification

The information provided in this application for employment is true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand that all appointments are probationary and that I must demonstrate my fitness for continued employment during the probationary period. I also understand that I must be available from time to time for work outside normal business hours as the needs of the department require. Further, I agree to take a physical examination, given by an appointed Town physician, which may include testing for drugs or a psychological examination, as required, and recognize that any offer of employment may be contingent upon the results of such an examination. I understand that any employment offer by the Town is conditional upon my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986. I authorize investigation of all statements contained in this application and the release of any pertinent information regarding my education, past employment history and background.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Electronic Signature - By clicking this you agree that the electronic signature appearing above on this application is the same as a handwritten signature for the purposes of validity, enforceability and admissibility.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.