



APPLICATION FOR EMPLOYMENT
City of Medford, Massachusetts
Human Resources, 85 George P. Hassett Drive, Hedford
MA, 02155 jobs@medford-ma.gov

Thank you for your interest in employment with the City of Medford. The City provides equal employment opportunities to all employees and qualified applicants for employment without regard to race, color, religion, sex, national origin, ancestry, sexual orientation, disability, age, protected veteran status, pregnancy or pregnancy related conditions, genetics, gender identity or expression, or any other characteristic protected by federal, state, or local laws.

INSTRUCTIONS: Each question must be fully and accurately answered. Please PRINT or TYPE your responses, except for your signature on the last page of the application. You may apply for multiple positions with a single application. Please list all position applied to.

In connection with this employment application, the City of Medford may request that you agree to the release to the City of Medford of a criminal offender information report, a consumer credit report, and/or an investigative credit report. In such an event the City of Medford will provide you with a separate notice and appropriate authorization for disclosure forms.

GENERAL

Position(s) Applying For: _____ Date: _____

Referral Source: City Website: ____ City Hall Posting: ____

Online Ad (List Where): _____ Relative (List Who): _____

Employee (List Who): _____ Other: _____

Date Available for Work: _____

PERSONAL

Name (First): _____ (MI) _____ (Last) _____

Address (Street): _____ Address 2 (Apt #): _____

(City): _____ (State): ____ (Zip): _____

Telephone: _____ Email: _____

Are you 18 or older? (Yes) (No) If no, please list your date of birth: _____

Have you worked for the City of Medford Before? (Yes) (No)

If yes, list: (Dept.) _____ Dates of service: (From) _____ (To) _____

Were you in the U.S. Armed Forces? (Yes) (No)

If yes, which branch? _____ Dates of Service: (From) _____ (To) _____

PRESENT AND PRIOR EMPLOYMENT

Please list below employers in consecutive order with present or most recent employer listed FIRST. Account for all periods of time between employment.

If you are submitting a resume you are not required to complete this section.

Name and address of company	Dates	Title:
	From	Description of duties:
	Mo./Yr.	
	To	
Type of Business:	Mo./Yr.	
Telephone:		
Supervisor:		
May we contact this employer?		
Reasons for leaving or seeking other employment:		

Name and address of company	Dates	Title:
	From	Description of duties:
	Mo./Yr.	
	To	
Type of Business:	Mo./Yr.	
Telephone:		
Supervisor:		
May we contact this employer?		
Reasons for leaving or seeking other employment:		

Name and address of company	Dates	Title:
	From	Description of duties:
	Mo./Yr.	
	To	
Type of Business:	Mo./Yr.	
Telephone:		
Supervisor:		
May we contact this employer?		
Reasons for leaving or seeking other employment:		

EDUCATION

If you submit a resume you are not required to complete this section.

(Degree)

Highschool: _____ **Completed:** (Yes) (No)

Name of Institution:

Location:

(Degree)

Undergraduate: _____ **Completed:** (Yes) (No)

Name of Institution:

Location:

(Degree)

Postgraduate: _____ **Completed:** (Yes) (No)

Name of Institution:

Location:

Please List any other relevant educational experience: _____

SPECIAL SKILLS, APTITUDES, AND OTHER QUALIFICATIONS

Please rate your level of familiarity with the listed computer software as unfamiliar, beginner, intermediate or advanced., if it is applicable to the job position.

Microsoft Suite (word, excel, etc.): _____

GIS Software: _____

HRIS Software: _____

Other – Please List: _____

Driver's License (Yes) (No) **State:** _____ **Expires:** _____ **Class:** _____

List any machinery or heavy equipment you operate: _____

Special qualifications and skills (licenses, certificates, memberships in professional organizations, etc.): _____

Do you have any relatives who work or have worked for the City _____ Yes _____ No

If yes, who: _____

REFERENCES

Please include former direct supervisors, exclude relatives.

Name and Title	Address	Phone	Email
1.) _____	_____	_____	_____
2.) _____	_____	_____	_____

OTHER INFORMATION

Are you legally authorized to work in the United States?

Yes: No:

Please review the functions of the position as outlined in the job description. Are you able to perform all the essential duties of the position for which you are applying?

Yes: No:

APPLICANT'S CERTIFICATION

1. I hereby certify that all statements made in this application are true and complete under pains and penalties of perjury. I authorize the City of Medford to investigate all statements made as part of this application and to secure any necessary information from all prior employers, references, academic institutions and law enforcement agencies.
2. I release all of those persons, employers, references, academic institutions and law enforcement agencies from any and all liability arising from their giving and receiving information about my employment history, academic credentials, qualifications or criminal record.
3. I understand that federal law prohibits the employment of persons not legally authorized to work in the United States and that all persons hired must submit satisfactory proof of employment authorization and identity and that failure to submit proof will result in denial of employment.
4. I understand nothing in this employment application or in my communication with any City employee or official is intended to create an employment contract between the City and me.

Signature: _____

Date: _____