



TOWN OF LINCOLN

Middlesex County...Massachusetts

PARKS AND RECREATION DEPARTMENT

16 Lincoln Road

Lincoln, MA 01773

Tel 781 259-0784

Fax 781 259-1333

www.LincolnRec.com

The Town of Lincoln is an Affirmative Action / Equal Employment Opportunity Employer

All information must be typed or printed in readable writing. Unreadable applications will be discarded.

Date of Application: _____

Position Applying For: _____

Personal Information

1. Name: _____
First Middle Last

2. Address: _____
Number Street Apartment Number

City/Town State Zip Code

3. Telephone Home: _____ Daytime: _____ Cell: _____

4. Email : _____ 5. Do you hold a valid drivers license? YES NO

6. If hired, can you provide proof of citizenship or legal right to work? YES NO

7. Are you under 18 years of age? YES NO

8. Are you currently/have you ever been employed by the Town before? YES NO

If yes, when? _____ In which department? _____

9. Are you now, or have you ever, worked for another MA state or local agency? YES NO

10. Are you retired from any Massachusetts state or local government position? YES NO

If yes, which agency: _____ Year retired: _____

Education

| Name / Location | Course of Study | Years Completed | Did you graduate? | Degree / Date |
|--------------------|-----------------|-----------------|--|---------------|
| High School | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| College | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Graduate School | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Business/Technical | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | |

11. Do you possess the following skills? Please list in detail all that apply.

Specialized Training? YES NO Name of Training/Course: _____

Professional Licenses? YES NO Licenses: _____

Professional Memberships? YES NO Name of Organizations: _____

Computer Software/Office Equipment? YES NO Name of Programs: _____

Employment History

List your present employer first. A resume or supplemental sheet may be included; however, this section still must be completed.

1. Employer's Name: _____

Address: _____ Telephone Number: _____

Job title: _____ Worked From: _____ To: _____

Immediate Supervisor's Name and Job Title: _____

Salary: _____ / _____ May we contact this employer? YES NO
Starting Ending

Describe the work you performed: _____

Reason(s) for leaving: _____

2 . Employer's Name: _____

Address: _____ Telephone Number: _____

Job title: _____ Worked From: _____ To: _____

Immediate Supervisor's Name and Job Title: _____

Salary: _____ / _____ May we contact this employer? YES NO
Starting Ending

Describe the work you performed: _____

Reason(s) for leaving: _____

3 . Employer's Name: _____

Address: _____ Telephone Number: _____

Job title: _____ Worked From: _____ To: _____

Immediate Supervisor's Name and Job Title: _____

Salary: _____ / _____ May we contact this employer? YES NO
Starting Ending

Describe the work you performed: _____

Reason(s) for leaving: _____

4 . Employer's Name: _____

Address: _____ Telephone Number: _____

Job title: _____ Worked From: _____ To: _____

Immediate Supervisor's Name and Job Title: _____

Salary: _____ / _____ May we contact this employer? YES NO
Starting Ending

Describe the work you performed: _____

Reason(s) for leaving: _____

If more room is required, an additional sheet may be attached.

References

Please provide professional and/or business references only. Note that references listed in this section will be contacted.

1. Reference #1

Name: _____ Address: _____

Business Relationship: _____ Telephone: _____

2. Reference #2

Name: _____ Address: _____

Business Relationship: _____ Telephone: _____

3. Reference #3

Name: _____ Address: _____

Business Relationship: _____ Telephone: _____

4. Reference #4

Name: _____ Address: _____

Business Relationship: _____ Telephone: _____

How did you learn about the job for which you are applying?

- Walk-in
- Newspaper; title _____
- Posted Town Bulletin _____
- Town Employee
- Professional Journal; title _____
- the Internet; website _____

Other

A. Pursuant to M.G.L. c 276, s100A:

An applicant for employment with a sealed record on file with the Commissioner of Probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need in services which did not result in a complaint transferred to the Superior Court for Criminal Prosecution.

- 1) Have you ever been convicted of a felony? • YES • NO
- 2) Have you been convicted of a misdemeanor within the past five years (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace)? • YES • NO
- 3) Have you completed a period of incarceration within the past five years for any misdemeanors (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace). • YES • NO
- 4) If the answer to question # 3 above is "yes" please state whether you were convicted more than five years ago for any offense (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace)? • YES • NO

Submission of this employment application in no way guarantees employment or continued employment.

Agreement

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 authorize investigation of all statements contained in this application and the release of any pertinent information regarding my education, past employment history and background. I authorize the Town of Lincoln to obtain any information from schools, employers or individuals relating to my activities. This information may include, but is not limited to: academics, achievement, performance, attendance, personal history and discipline. Further, I hereby authorize all references, persons, schools, my current employer (if applicable) and previous employers and organizations named in this application, unless otherwise stated, to provide the Town of Lincoln any relevant information that may be required to arrive at an employment decision. I understand that the information released is for the Town of Lincoln's use only.

I hereby voluntarily release, discharge and exonerate the Town of Lincoln, its agents and representatives, and any person so furnishing information from any and all liabilities of every nature and kind arising out of the furnishing or inspection of such documents, records and other information or the investigations made by or on behalf of the Town of Lincoln.

I understand that all appointments are probationary and that I must demonstrate my ability for continued employment. I also understand that I must be available from time to time to work outside normal business hours, as the needs of the department require.

If required for the position I am seeking, I agree to take a physical examination, 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 within three days of the date of hire.

I represent that I have read and fully understand the foregoing and seek employment under these conditions.

Signature: _____ Date: _____

Discrimination against any person in any practice or procedure in advertising, recruitment, referrals, testing, hiring, transfer, promotion or any other term, condition or privilege of employment which limits or adversely affects employment opportunities, because of political or religious opinions or affiliations, or because of race, color, sex, sexual orientation, national origin, marital status, pregnancy, parenthood, age or handicap which is unrelated to the person's occupational qualifications or any other non-merit factor which is not a bona fide occupational qualification is prohibited.

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



TOWN OF LINCOLN

Middlesex County...Massachusetts

PARKS AND RECREATION DEPARTMENT

16 Lincoln Road

Lincoln, MA 01773

Tel 781 259-0784

Fax 781 259-1333

www.LincolnRec.com

Release

I _____ a candidate for the position of _____ hereby authorize the Town of Lincoln to investigate all statements in my application and to secure any necessary information from all my employers, references, and academic institutions. I hereby release all of those employers, references, academic institutions, and the Town of Lincoln from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the Town of Lincoln.

I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials and employment references. I further understand that any false or misleading statements will be sufficient cause for rejection of my application if the Town of Lincoln has not yet employed me and for immediate dismissal if the Town of Lincoln has employed me. I also authorize the Town to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having legal and proper interest, and I hereby release the Town of Lincoln from any and all liability for its providing this information.

In the event of my employment with the Town of Lincoln, I will comply with all rules, regulations, and policies set forth in the Town of Lincoln's Personnel Policies and Bylaw or other communications distributed by the Town of Lincoln.

I understand that nothing in this employment application, in the Town of Lincoln's policy statements or personnel guidelines, or in my communications with any Town of Lincoln official is intended to create an employment contract between the Town of Lincoln and me. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon the Town of Lincoln unless it is made in writing and signed by a Town of Lincoln official.

I hereby acknowledge that I have read and understand the preceding statement.

Signed: _____

[Signature of Applicant]

Date: _____



TOWN OF LINCOLN

Middlesex County...Massachusetts

PARKS AND RECREATION DEPARTMENT

16 Lincoln Road
Lincoln, MA 01773
Tel 781 259-0784
Fax 781 259-1333
www.LincolnRec.com

Voluntary Affirmative Action Request Form

The Town of Lincoln as part of its commitment to Affirmative Action / Equal Employment Opportunity policies, invites you to provide the following information. All applicants will be considered without regard to race, color, religion, creed, gender, national origin, age, marital or veteran status, sexual orientation, medical condition or disability. The information is voluntary and refusal to provide it will not have any bearing on our employment decision. The data is confidential and will be filed separately. It will be available only to authorized personnel and is used to further the Town's Affirmative Action / Equal Employment Opportunity policies. Your cooperation is appreciated.

1. Applicant Name: _____

2. Position Applied for: _____

3. Gender: Male Female

4. Ethnic Origin:

White – All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

Black – All persons having origins in any of the black racial groups of Africa.

Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin regardless of race.

Asian or Pacific Islander – All persons having origins in any of the peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

American Indian or Alaskan Native – All persons having origins in any of the original people of North America maintaining cultural identification through tribal affiliations or community recognition.

Cape Verdean – All persons having origins on the Cape Verde Islands.

5. Veteran Status: YES NO
Vietnam Era, 1962 – 1975 YES NO

6. Disabled: YES NO