

Town of Provincetown Employment Application

260 Commercial Street, Provincetown, MA 02657

Phone: 508-487-7000 Fax: 508-487-9560

www.provincetown-ma.gov

An Equal Opportunity/Affirmative Action Employer

The Town of Provincetown is an equal opportunity employer and does not discriminate against any applicant because of race, color, religion, sex, marital status, national origin, age, disability, genetic information, sexual orientation, gender identity or any other class protected by federal, state or local law. Any person who needs assistance in fully participating in the application process should contact the Town of Provincetown, Human Resource Manager's Office.

A fully completed application is required for each position applied for. Also, "see resume" is not acceptable in any field.

I. Contact Information.

Name	Date
Address # and Street or P.O. Box	City and State
Zip Code	
Telephone (home and cell)	Email
(h) (c)	

II. Position Applying For (Please specify position title or job category).

How did you hear about the position? _____

Have you ever been employed by the Town of Provincetown? When? What department? _____

III. Education.

School	Name, Address, City, State	Years Attended	Degree
High School			
College			
Graduate School			
Trade, Business, Night Courses			
Military Service, Other Training			

IV. Licenses (Please list all licenses you possess that are relative to the position you seek). A valid license is a condition of employment, where required.

Do you have a valid MA driver's license (Class D Auto)? ✓Yes _____ ✓No _____ If yes, enter expiration date _____

Do you have a valid MA CDL license (Class A or B)? ✓Yes _____ ✓No _____ If yes, enter expiration date _____

Do you have a valid MA Hydraulic license? ✓Yes _____ ✓No _____ If yes, enter expiration date _____

What other valid licenses or certifications do you possess (job related)? _____

V. Office Skills (If applicable).

Check the column that you feel best describes your knowledge:

	✓Beginner	✓Intermediate Level	✓Advanced Level
Knowledge of Word Processing			
Knowledge of Spreadsheets			
Knowledge of Databases			
Automated Accounting System Knowledge			
Bookkeeping Knowledge			
Transcription Ability			
Shorthand/Speedwriting Ability			

VI. Special Skills.

Please list any other skills or abilities you feel are relevant: _____

VII. Employment History. {please do not write "see resume"}

Please account for the last 4 positions you have held. Start with your present or last employer. You may include military service and any verifiable work performed as an intern or volunteer. You () may () may not contact my present employer.

Employer	Address
Telephone	Title
Supervisor	Dates Worked
	Reason for Leaving

Description of Primary duties: _____

Employer	Address
Telephone	Title
Supervisor	Dates Worked
	Reason for Leaving

Description of Primary duties: _____

Employer	Address
Telephone	Title
Supervisor	Dates Worked
	Reason for Leaving

Description of Primary duties: _____

Employer	Address
Telephone	Title
Supervisor	Dates Worked
	Reason for Leaving

Description of Primary duties: _____

VIII. Business References: {a minimum of 3 references is required. Please do not write "see resume"}

Name	Address	Phone	Relationship
Name	Address	Phone	Relationship
Name	Address	Phone	Relationship
Name	Address	Phone	Relationship

IX. Criminal History.

- A. The Town of Provincetown requires a Criminal Offense Record Inquiry (CORI check) on all prospective employees for certain positions.
- B. A conviction will not necessarily be a bar to employment.

X. Employment of Minors.

The Town of Provincetown is subject to certain child labor provisions regarding the employment of persons under the age of 18. Further, an Employment Permit or Educational Certificate may be required, depending on your age.

Are you under age 18? _____ If yes, please indicate your age: _____

XI. Medical Information.

All offers of employment are conditional upon the satisfactory completion of a Health Questionnaire and conditional upon a physical examination, where required. Satisfactory fitness to perform the essential duties of the position is a condition of employment.

XII. Pre-Employment Drug Testing.

All offers of employment are conditional upon the satisfactory completion of a pre-employment drug test, where required. Satisfactory completion of a required drug or alcohol test is a condition of employment as outlined in the Drug and Alcohol Testing Policy of the Town of Provincetown.

XIII. Lie Detector Test.

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.

XIV. Signature.

CAREFULLY READ ALL PARTS OF THIS APPLICATION FORM BEFORE SIGNING.

- A. I understand that acceptance of this application by the Town of Provincetown does not imply that I will be employed. (Exceptions to A is an employee filling out this application for promotional purposes only.)
- B. The information that I have provided is true and complete. I understand that misrepresentation or omission of any fact in my application, resume, or in any other materials or as provided during interviews, can be justification for refusal of employment or can be justification for termination from employment, if employed.
- C. I understand that any offer of employment that I receive from the Town of Provincetown is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Provincetown receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry if required, satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination. (Employees promoted into a grade 5 or higher position from a position that does not include drug testing will be added to the random drug testing list.)
- D. In processing my application for employment, the Town of Provincetown may verify all of the information provided by me concerning, among other things, my prior employment or military record, education, character, general reputation and personal characteristics.
- E. I authorize the Town to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting my present and former employers, by contacting individuals listed as business, educational or personal references, and by contacting other individuals to provide or further clarify information about me.
- F. I hereby release my present and former employers and all individuals contacted for factual information about me from any and all liability for damages arising from furnishing the requested information.
- G. If employed by the Town of Provincetown, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to undergo a physical examination, that I may be subject to drug and/or alcohol testing, that the Town may request a Criminal Offense Record Inquiry (CORI check) on me, investigate my driving record or verify my license(s) or certification(s) as required for employment at any time during my employment. As a condition of employment an employee may be required to provide additional or updated information especially if this employee has been on workers comp and may require both drug testing and an employment physical in order to allow us to have the necessary information for making a proper decision or reasonable accommodations, if necessary.
- H. I understand that the Town of Provincetown is an at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.

My Signature Certifies That I Have Read And Agree With The Above Statements And All Statements Contained In This Application For Employment.

Applicant Name (Please Print)

Applicant Signature

Date

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW INDICATING THAT YOU UNDERSTAND AND AGREE TO THE TERMS AS STATED.

I understand that this application is but one element of the selection process for becoming a seasonal employee with the Town of Provincetown, and that an acceptable background investigation does not guarantee your selection to a position.

I understand also that this Department has established day and night tours for which I must be available as required. I further understand that any appointment tendered me will be contingent upon the results of a complete character and fitness investigation, and I am aware that willfully withholding information or making false statements on this application will be the basis for rejection of my application or dismissal from the Department. I agree to these conditions and I hereby certify that all statements made by me on this application are true and complete to the best of my knowledge. I hereby give the Provincetown Police Department authorization to contact any person reasonably related to the character and fitness investigation. I also authorize any person contacted to share written and oral information, which is reasonably related to the public safety position for which I am applying.

Finally, I hereby release, discharge and exonerate this municipality, its agents and representatives, and any person furnishing or receiving information, from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, or other information or investigations made by or on behalf of this municipality. This authority shall continue until revoked in writing by the undersigned.

Date

Signature of Applicant

COMMONWEALTH OF MASSACHUSETTS

_____, SS.

I, _____, being duly sworn, depose and state I am the above named person. I signed the foregoing statement. I personally read and printed by hand or typewriter/printer answers to each and every question therein and I do solemnly swear that each and every answer is full, true and correct in every respect.

Signature of Applicant

Sworn before me this _____ day of _____, _____.

Notary Public

My Commission Expires: _____

GENERAL RELEASE

Date: _____

I, _____, born at _____ on _____, having filed an application for a position with the Provincetown Police Department, consent to have an investigation made as to my moral character, reputation and fitness for the position to which I have applied. I also agree that such information as may be received, reported to and reviewed by the appointing authority. I agree to give any further information, which may be required in reference to my past record.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association or institution having control of any documents, records and other information pertaining to me, to furnish to the Provincetown Police Department any such information, including, documents, records, files regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, and to permit the police department or any of its agents or representatives to inspect and make copies of such documents, records and other information.

Specifically, in addition, I hereby authorize the release of the following data or records to the Provincetown Police Department: _____

I hereby release, discharge and exonerate the Provincetown Police Department, its agents and representatives and any person so furnishing information from any and all liability 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 Provincetown Police Department.

This authority shall continue for one year unless sooner revoked in writing by the undersigned.

Signed

COMMONWEALTH OF MASSACHUSETTS

_____, SS.

I, _____, being duly sworn, depose and state I am the above named person. I signed the foregoing statement. I personally read and printed by hand or typewriter/printer answers to each and every question therein and I do solemnly swear that each and every answer is full, true and correct in every respect.

Signature of Applicant

Sworn before me this _____ day of _____, _____.

Notary Public
My Commission Expires: _____

CORI CHECK ACKNOWLEDGMENT

I, _____ residing at _____
_____, acknowledge that a Criminal Offender Record
Information (CORI) check will be performed as part of the municipality's hiring process.
I further acknowledge that a refusal to allow the CORI check to be performed will cause
my application to no longer be considered for employment.

Signature

COMMONWEALTH OF MASSACHUSETTS

_____, SS.

I, _____, being duly sworn, depose and state I am the above
named person. I signed the foregoing statement. I personally read and printed by hand
or typewriter/printer answers to each and every question therein and I do solemnly
swear that each and every answer is full, true and correct in every respect.

Signature of Applicant

Sworn before me this _____ day of _____, _____.

Notary Public
My Commission Expires: _____