



CITY OF PITTSFIELD

APPLICATION FOR EMPLOYMENT

An equal opportunity employer, the City of Pittsfield does not discriminate in hiring or in terms and conditions of employment because of an individual's race, creed, color, ancestry, religion, age, sex, national origin, marital or veteran status, sexual orientation, handicap or disability or any other legally protected status. The City of Pittsfield only hires individuals authorized for employment in the United States.

(PLEASE PRINT)

Position(s) Applied For	Date of Application	
How Did You Learn About Us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other: _____

Date Available for Employment: _____

Are you available to work: Full Time Part Time Shift Work Temporary

List names of relatives now employed by the City of Pittsfield: _____

Have you ever been employed by the City of Pittsfield: _____

If yes, where and when: _____

Are you authorized for employment in the United States? Yes No

Last Name	First Name	Middle Name			
Address	Number	Street	City	State	Zip Code
Telephone Number(s) Home	Business				

Have you ever been convicted of a felony? Yes No

If yes, please give date and explanation: _____

Have you been convicted of a misdemeanor within the past 5 years? Yes No

You may answer NO for first convictions only for the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace.

Note: Any applicant for employment with a sealed record on file with the Commissioner of Probation may answer "no record" with respect to any 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 of services which did not result in a criminal conviction.

Education

	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
Elementary School				
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

Specialized Skills	Check Skills/Equipment Operated	
<input type="checkbox"/> Personal Computer <input type="checkbox"/> Typewriter - w.p.m. ____ <input type="checkbox"/> Photocopier <input type="checkbox"/> Fax Machine <input type="checkbox"/> Multi-line Telephone <input type="checkbox"/> Adding Machine <input type="checkbox"/> Cash Drawer	<input type="checkbox"/> Microsoft Word <input type="checkbox"/> Microsoft Excel <input type="checkbox"/> Microsoft Power Point <input type="checkbox"/> Microsoft Access <input type="checkbox"/> Word Perfect <input type="checkbox"/> Lotus 1-2-3 <input type="checkbox"/> Munis	Other (list): _____ _____ _____ _____

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Please list Licenses or Certificates, if any (include driver's license state and number):

Employment Experience

Starting with your present or last job, list all full or part time work including paid, volunteer, military service and summer jobs performed in the last ten years. Include work performed more than ten years ago if it applies to the job for which you are applying.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held:

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.

Additional Information

References. No personal references; work-related references only.

1.

(Name)

(Phone Number)

(Address)

2.

(Name)

(Phone Number)

(Address)

3.

(Name)

(Phone Number)

(Address)

Equal Opportunity Information

The information below is requested as part of the equal opportunity/affirmative action program to provide statistical information in compliance with Federal and State regulations. Your response is strictly voluntary and will not result in any adverse treatment.

Date of Birth: _____ Social Security Number: _____

Racial/Ethnic Data: Black (Non-Hispanic) Native American Indian or Alaskan
 Asian/Pacific Islander Hispanic White Other

Sex: Female Male

Do you have any disabling or handicapping conditions: Yes No

If so, please describe:

If a handicap has been identified, please describe any accommodations needed to assist you:

COMMENTS:

Applicant's Statement

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing the essential functions of the job for which you are applying with or without reasonable accommodations?

YES NO

I understand that this application is not a contract of employment. I understand that to be employed, I must be lawfully authorized to work in the United States, and I must show the City of Pittsfield documents that will prove this. I also understand that as a condition of employment, I may be required to successfully complete a pre-employment medical examination, including a urine drug analysis. I understand that the City of Pittsfield will investigate my work and personal history, which may include a Criminal Offender Record Inquiry (CORI) and/or a Sex Offender Registry Information (SORI) check. I understand that the City of Pittsfield may investigate and verify all statements contained in this application, related papers, and/or given in interviews. I authorize all individuals, schools and firms named herein, except my current employer, if so noted, to provide any information requested about me, and I release them from all liability in connection with providing this information.

I certify that all statements herein are true and understand that any false or misleading information given herein shall be sufficient cause for dismissal or refusal of employment.

Signature of Applicant

Date

NOTICE: 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.