Town of Tisbury Employment Application

PO Box 1239, 51 Spring St. Tisbury, MA 02658 508.696.4200

www.tisburyma.gov

An Equal Opportunity/Affirmative Action Employer

The Town of Tisbury is an equal opportunity employer and does not discriminate against any applicant based on race, religion, sex, marital status, national origin, age, disability, sexual orientation 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 Tisbury Personnel Director.

I. Contact Informatio	che entire application ("See resume or see a on.	- /	
Name		Telepl	none
Mailing Address	City and State	Zip C	ode
Street Address	City and State	Zip C	ode
Email Address:			
Emergency Contact N	Jame and phone Number		
	ears or older?YesNo quired to provide authorization to work.)		
II. Position applying	for (Please specify position number, position title o	r job category):	
How did you hear about	the position?		
Have you ever been emp	ployed by the Town of Tisbury? When, and Which d	lepartment?	
	es who currently work for the town? Who and Which	n department?	
III. Education. School Name	Address, City, State	Years Attended	Degree
	Address, City, State	Tears Attended	Degree
High School			
College			
Graduate School			

Military Service, Other Training 7. Licenses. A valid license may be a condition of you have a valid Massachusetts driver's licento you own a vehicle? Do you have a valid CDL license (Class A or B) you have a valid Hydraulic license? Yes ther valid licenses or certifications you possess ther applicable licenses / training	Automobile insurance? ? Yes No No If yes (job related)?	es No l	date
you have a valid Massachusetts driver's licent by you own a vehicle? Do you have A by you have a valid CDL license (Class A or B) by you have a valid Hydraulic license? Yes her valid licenses or certifications you possess	Automobile insurance? ? Yes No No If yes (job related)?	es No l	date
you have a valid Massachusetts driver's licent by you own a vehicle? Do you have A by you have a valid CDL license (Class A or B) by you have a valid Hydraulic license? Yes her valid licenses or certifications you possess	Automobile insurance? ? Yes No No If yes (job related)?	es No l	date
you have a valid Massachusetts driver's licent by you own a vehicle? Do you have A by you have a valid CDL license (Class A or B) by you have a valid Hydraulic license? Yes her valid licenses or certifications you possess	Automobile insurance? ? Yes No No If yes (job related)?	es No l	date
o you own a vehicle? Do you have A o you have a valid CDL license (Class A or B) o you have a valid Hydraulic license? Yes her valid licenses or certifications you possess	Automobile insurance? ? Yes No No If yes (job related)?	If yes, expiration , expiration date	date
o you have a valid CDL license (Class A or B)? o you have a valid Hydraulic license? Yes ther valid licenses or certifications you possess	? Yes No No If yes (job related)?	If yes, expiration, expiration date	
o you have a valid Hydraulic license? Yes her valid licenses or certifications you possess	No If yes (job related)?	, expiration date	
her valid licenses or certifications you possess	(job related)?		
her applicable licenses / training			
nor approude needses / training			
_			
Office Skills (If applicable).	Check the column Beginner	n that best describes y ☐ Intermediate	our level of skill: ☐ Advanced
ntomated Accounting Systems			
ookkeeping			
omputer Skills			
orthand/Speedwriting			
readsheets			
anscription			
ord Processing			
stomer Service			
I. Special Skills. ease list any other skills or abilities you feel ma	ay be job related:		
II. Employment History. {please do not write ease account for the last 4 positions you have h litary service and any verifiable work performed.	neld, starting with your		nt employer. You may include
ou () may () may not contact my present			
Employer	Add	ress	

Telephone	Title
Supervisor	Dates Worked
Supervisor	Dutes Worked
Comments	Reason for Leaving
Description of a large of the same	
Description of primary duties:	
Employer	Address
Telephone	Title
Totephone	
Supervisor	Dates Worked
Comments	Reason for Leaving
Comments	Reason for Leaving
Description of primary duties:	
Employer	Address
Telephone	Title
Supervisor	Dates Worked

Comments		Reason for Leaving		
Description of primary duties	::			
Employer		Address		
Telephone		Title		
Supervisor		Dates Worked		
Comments		Reason for Leaving		
Description of primary duties	::			
Have you ever been dismissed or asked to resign from a job? If yes, please explain				
VIII. Business References: (A minimum of 3 references is requir	ed. Please do not write "see resume")		
Name	Address	Phone	Relationship	
Name	Address	Phone	Relationship	
Name	Address	Phone	Relationship	
			1	

Name	Address	Phone	Relationship

IX. Employment of Minors.

The Town of Tisbury 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:

X. 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.

XI. 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 Tisbury.

XII. 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.

XII. Criminal Offender Record Information.

All offers of employment are conditional upon a Criminal Offender Record Information request.

XIV. Signature.

I have carefully read all parts of this application form prior to signing.

- A. I understand that acceptance of this application by the Town of Tisbury 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 Tisbury is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Tisbury 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 Tisbury 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 Tisbury, 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 Tisbury 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.

A	(Dlassa Drint)	
Applicant Name	(Please Print)	
Applicant Signature		Date

Please mail to: John W. Grande, Personnel Director

Town of Tisbury

PO Box 1239, 51 Spring St. Vineyard Haven, MA 02568 pbennett@tisburyma.gov

Please submit with a copy of a valid driver's license if you have one

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE.