

# City of Methuen



## APPLICATION

Date: \_\_\_\_\_

Position Applying for: \_\_\_\_\_

### Personal Information (please print)

Name: \_\_\_\_\_  
(Last) (First) (MI)

Address: \_\_\_\_\_  
(Street) (City) (State) (zip code)

Telephone: \_\_\_\_\_

Date you can begin work: \_\_\_\_\_

Are you available all shifts Yes \_\_\_ No \_\_\_

Have you ever worked for the City of Methuen Yes \_\_\_ No \_\_\_

If Yes, dates: \_\_\_\_\_ position: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Relatives formerly or currently employed by the City of Methuen. Please provide department where employed: -

\_\_\_\_\_

Long range goals: \_\_\_\_\_

\_\_\_\_\_

Achievements/Special Skills: \_\_\_\_\_

\_\_\_\_\_

Professional Qualifications & Membership In Professional Bodies: \_\_\_\_\_

\_\_\_\_\_

### Education

List from Present to Past

School/Institution	Major or Area of Study	Years completed	Year graduated

## MA Professional Trade, Certifications, Driver's License

License \_\_\_\_\_ License# \_\_\_\_\_ Date Issued \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 License \_\_\_\_\_ License# \_\_\_\_\_ Date Issued \_\_\_\_\_ Exp. Date \_\_\_\_\_  
 License \_\_\_\_\_ License# \_\_\_\_\_ Date Issued \_\_\_\_\_ Exp. Date \_\_\_\_\_

## Employment History List current first

From: _____ To: _____ Reason for leaving _____ Current: _____ telephone: _____ Address: _____ Position Held / Duties: _____
From: _____ To: _____ Reason for leaving _____ Previous: _____ telephone: _____ Address: _____ Position Held / Duties: _____
From: _____ To: _____ Reason for leaving _____ Previous: _____ telephone: _____ Address: _____ Position Held / Duties: _____
From: _____ To: _____ Reason for leaving _____ Previous: _____ telephone: _____ Address: _____ Position Held / Duties: _____

## References

Name	Address	Telephone	Relationship	Years known

Applications are accepted for any current posted position. It is the applicant's responsibility to re-submit his/her application for future consideration in a separate position.

I hereby state that the information given by me in this application is true in all respects. I understand that if I am employed and the information is found to be false in any respect, I will be subject to dismissal without notice at any time. I hereby authorize my former employers to release information pertaining to my record, my work habits, and my work performance while in their employ. I hereby authorize the individuals listed as personal references to release information that may pertain to my work habits or work performances.

I understand that it is unlawful in MA 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.

I understand and agree that, if I am offered employment by the City of Methuen, my employment will be for no definite term and that either I or the City of Methuen will have the right to terminate the employment relationship at any time, with or without cause and with or without notice. I also understand this status can only be altered by a written contract of employment that is specific as to all material terms and is signed by me, my union representative (if applicable) and the Mayor.

Statements made in this application are made under the pains and penalties of perjury.

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(Signature)

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(date)

**PLEASE RETURN COMPLETED APPLICATION TO:**

**City of Methuen  
Human Resources  
41 Pleasant St., Rm 206  
Methuen, MA 01844**

*The City of Methuen is an equal opportunity/affirmation action employer and service provider. It is our policy not to discriminate on the basis of race, color, national origin, ancestry, sex, sexual orientation, religious creed, genetics, veteran status, disability, or age, in our programs, activities, and employment practices. The following person has been designated to handle inquiries regarding the non-discrimination policy: Lisa Crowley, Director of Human Resources, City of Methuen.*