

## **APPLICATION FOR EMPLOYMENT**

Notice to Applicants							
All applicants will be given equal consideration regardless of race, color, religion, sex, sexual orientation, ancestry, age, disability, handicap, genetic information, service in the military, gender identity, or membership in any other group protected by applicable law. Applicants who need an accommodation in the application or interview process are asked to make a request by contacting Conway's Town Administrator (townadmin@townofconway.com; 413-369-4235, x3).							
Personal Information							
Date:	Phone: (_	_)	Email:				
Name:	(last)		(first)	(middle)			
Street Address	/P.O. Box:						
City, State, Zip	Code:						
Position Desired:		Department:					
Date available for employment:							
Have you ever been employed by the Town of Conway before?YesNo							
If so, dates: Price		Prior position:					
If so, reason	for leaving:						
<b>Education</b> Please describe any education or experience you have relevant to the position you are applying for.							

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Employment History								
Please give accurate, complete. full-time and part-time employment record. Start with your most recent								
employer. You may also include any verified work performed a		this listing.						
Company Name	Telephone							
Address:	Employed (state M	Ionth & Year)						
Name of Supervisor	From:	To:						
Job Title and Description								
Reason for Leaving								
Company Name	Telephone							
Address:	Employed (state N	Ionth & Year)						
Name of Supervisor	From:	To:						
-								
Job Title and Description								
Reason for leaving								
Company Name	Telephone							
Address:	Employed (state M	Ionth & Year)						
Name of Supervisor	From:	To:						
Job Title and Description	1							
Dessen for Leaving								
Reason for Leaving								

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References (work-related only, please omit relatives)							
Name	Address	Telephone	Relationship				
1							
2							
3							
Other Information							
Names of friends and/or relatives employed by the Town:							

## Acknowledgement Statement

I hereby certify that the information contained in this application form and in any attachments listed or attached, hereinafter made a part of this application, and to the best of my knowledge are true and correct unless I have indicated to the contrary. I authorize the references listed above to provide the Town any and all information concerning my previous employment and I further indemnify and hold harmless the Town from any and all liability and/or damages that may result from furnishing and/or disclosing such information to the Town. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, in my dismissal from employment.

I also understand and agree that no representative of the Town has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized Town representative. I understand, also, that I am required to abide by all rules and regulations of the Town. I understand that if I am hired, the nature of my relationship with the Town will be that of an **at-will employee** and that either I or the Town may terminate the employment relationship with or without cause or notice.

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Signature: \_\_\_\_\_

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