



SECTION 1: PERSONAL INFORMATION

Full Name:		Referred by:	
Address:			
City, State, Zip			
Email Address:		Phone:	

SECTION 2: EMPLOYMENT DESIRED

Position Applied For:		Preferred Start Date:	
Are You Currently Employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If so, may we inquire with your present employer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you authorized to work in the United States?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you available to work:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Flexible hours		

SECTION 3: EDUCATION HISTORY

HIGH SCHOOL		
School Name & Location	Years Attended	Diploma/GED Type

COLLEGE		
School Name & Location	Years Attended	Degree Type/Major

SECTION 4: WORK EXPERIENCE

EMPLOYER	DATES EMPLOYED	POSITION TITLE	REASON FOR LEAVING



SECTION 5: PROFESSIONAL REFERENCES

NAME	POSITION TITLE	EMPLOYER	CONTACT INFO

SECTION 6: ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

APPLICANT STATEMENT

EQUAL OPPORTUNITY EMPLOYER-This company is an Equal Opportunity Employer and does not discriminate based on race, color, religion, sex, national origin, sexual orientation, marital status, disability, age, or other protected characteristics under federal, state, and local law.

AT-WILL EMPLOYMENT-Employment is at-will. Either the employee or company may terminate employment at any time, with or without cause or notice.

INFORMATION VERIFICATION-I authorize the company to verify all information provided and contact former employers, schools, and references. I understand that false information may result in rejection of my application or termination of employment.

BACKGROUND CHECKS-If applicable, the company may conduct background checks including Criminal Offender Record Information (CORI). Under Massachusetts law, you have the right to request a copy of your criminal record and challenge its accuracy. Criminal history will not automatically disqualify candidates.

ACKNOWLEDGMENT-By signing below, I certify that: All information provided is true and complete, I understand employment is at-will, I authorize verification of information and background checks, I understand my rights under Massachusetts CORI laws and False information may result in application rejection or termination.

Signature of Applicant

Date

OFFICIAL USE ONLY

Date:

Interviewed by:

Recommendation:

APPROVALS

Hiring Manager Signature

Date