

LONGMEADOW PARKS AND RECREATION DEPARTMENT

735 Longmeadow Street Longmeadow, MA 01106

Employment Application



Please read and answer each question in this application, yourself, as completely and accurately as possible. Do not omit any answers. **"See Resume" is not an acceptable response to any of the questions;** however, a resume may be attached. An unsigned or incomplete application will not be processed.

If you require an accommodation in order to participate in any phase of the application process, because of a physical or mental disability, please make that fact known and a reasonable accommodation shall be made.

The Town of Longmeadow is an Equal Opportunity Employer. It is the policy of the Town of Longmeadow to afford equal opportunity to all qualified persons regardless of race, color, religious creed, national origin, ancestry, sex, age, criminal record, handicap (disability), mental illness, retaliation, sexual harassment, sexual orientation, genetics, or any other legally protected status. The Town of Longmeadow is committed to providing a reasonable accommodation if necessary to perform the essential functions of the job (except where age or sex is a bona fide occupational qualification as allowed by the Civil Rights Act of 1964).

APPLICANT INFORMATION- FULL TIME PART TIME

POSITION YOU ARE APPLYING FOR:

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Home Phone	Cell Phone		
Date Available	Email address		
Are you legally authorized to work in the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>		
Have you ever been employed with us before?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?	
Do any of your relatives work for the Town of Longmeadow?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, name and	
This position may require you to work on Holidays and weekends. Are you available on Holidays and	YES <input type="checkbox"/>	This position may require you to work daytime hours and evenings, are you able to work this type of schedule?	YES <input type="checkbox"/>
	NO <input type="checkbox"/>		NO <input type="checkbox"/>
Are you available for on-call or standby?	YES <input type="checkbox"/> NO <input type="checkbox"/>		

EDUCATION

High School		Address		
# of years completed?	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address		
# of years attended?	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Graduate		Address		
# of years attended?	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address		
# of years attended?	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

Are you currently furthering your education? Yes No
Please list any schools or programs in which you are enrolled and the anticipated graduation or completion date.

TRAINING

Please list any Training Courses/ Seminars related to position for which you are applying.

CERTIFICATIONS/LICENSES

Please list any current certification(s)/ license(s) which you possess. (Please be prepared to provide verification, if requested)

SPECIALIZED SKILLS

Please list any special skills you feel may be helpful to us in considering your application.

REFERENCES

Please list three professional references.

1. Full Name	Relationship
Company	Phone ()

Address

How long have you known this person?

2. Full Name	Relationship
Company	Phone ()

Address

How long have you known this person?

3. Full Name	Relationship
Company	Phone ()

Address

How long have you known this person?

PREVIOUS EMPLOYMENT- YOU MAY INCLUDE ANY VERIFIED WORK PERFORMED ON A VOLUNTEER BASIS.

You may exclude organizations which indicate race, color, religion, creed, gender, national origin, age, disability, marital or military status, genetic information, sexual orientation, or any other legally protected status.

Employer 1	Phone ()
Address	Supervisor

Job Title

Responsibilities

From	To	Reason for Leaving
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May we contact your previous supervisor for a reference? YES NO

Employer 2		Phone ()
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Employer 3		Phone ()
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Employer 4		Phone ()
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Employer 5		Phone ()
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Employer 6		Phone ()
Address		Supervisor
Job Title		
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>

MILITARY SERVICE (OPTIONAL)

Branch	Number of Years of Service
Rank at Discharge	Type of Discharge
If other than honorable, explain	

LETTER OF INTEREST

Please tell us why you are interested in employment with the Town of Longmeadow's Parks and Recreation Department.

SPECIAL NOTICES**LIE DETECTOR 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 is subject to criminal penalties and civil liability.

PRIVACY ACT OF 1974-

Title 5, United States Code Section 552a of the Privacy Acts generally prohibits federal governmental agencies from disclosing information in its possession concerning an individual's education, financial transactions, or criminal and employment history. You will be asked to initial and sign a statement appended to this application which will ask you to waive specific rights and authorize the Town of Longmeadow as well as other individuals or organizations to release information to allow for evaluation of your suitability for the employment you seek.

APPLICANT STATEMENT

Please read this statement carefully and initial each paragraph after printing application. If you have any questions, please ask a representative before signing.

____ I hereby authorize the Town of Longmeadow, its agents and representatives to investigate my references, work records, education and other matters related to my suitability for employment and, further, authorize my current and former employers to disclose to the Town of Longmeadow any and all letters, reports and other information pertaining to my employment with them, without giving me prior notice of such disclosure.

____ I hereby release the Town of Longmeadow, its agents and representatives, my current and former employers, educators, the references I give and all other persons or organizations disclosed by myself from any and all claims, demands or liabilities arising out of or in any way related to investigation or disclosure related to this employment.

____ I understand and agree that nothing contained in the application or conveyed to me during any interview which may be granted is intended to create an employment contract, implied or explicit, between me and the Town of Longmeadow.

____ I understand and agree that the Town of Longmeadow does not discriminate on the basis of race, color, religious creed, national origin, ancestry, sex, age, criminal record, handicap (disability), mental illness, retaliation, sexual harassment, sexual orientation, genetics, or any other legally protected status.

____ I understand and agree that *if offered employment*, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States.

____ I understand and agree that *if offered employment*, the offer may be contingent on several factors, depending on the position that I am offered. These may include my passing a pre-employment physical and alcohol and drug testing, the successful completion of medical and physical abilities tests, and CORI (Criminal Offender Record Information) inquiry. I further may be required to provide proof of certifications, records and licensures required to perform the duties of the position I am offered, or to attend and successfully complete training.

____ I understand and agree that *if I accept employment*, with the Town of Longmeadow the employment relationship is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period and may be terminated at any time by myself or the town provided my employment is subject to just cause provisions in a contract governing my employment. No promises or representations are binding on the Town of Longmeadow unless made through motion by the Select Board or in writing and signed by the Town Manager.

____ I understand and agree that *if I accept employment*, I will follow The Town of Longmeadow Harassment/Sexual Harassment policy, the Town of Longmeadow Drug Free Workplace policy and all other policies and regulations established as a condition of employment for all town employees as they exist or as they may be modified or amended from time to time.

I hereby certify that the information and answers given by me are true and complete to the best of my knowledge. I further affirm that any omission mistake, or misleading statement made on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. My signature below certifies that I have read and understand this statement and that I agree to the terms and conditions outlined in this document.

Signature

Date

IF COMPLETING THIS APPLICATION ELECTRONICALLY, PLEASE FIRST PRINT AND THEN SIGN AND DATE THIS APPLICATION. PLEASE KEEP A COPY FOR YOUR RECORDS.

APPLICATIONS SHOULD BE SUBMITTED TO:

THE DIRECTOR OF PARKS AND RECREATION
735 LONGMEADOW STREET
LONGMEADOW, MA 01106

OR VIA FAX
(413) 565-4165

THIS APPLICATION WILL BE KEPT ON FILE AT THE PARKS AND RECREATION FOR 1 (ONE) YEAR.

IN ORDER TO BE CONSIDERED AS AN APPLICANT FOR EMPLOYMENT, YOU MUST APPLY FOR A SPECIFIED OPEN POSITION. AS A RESULT, IF YOU WOULD LIKE TO BE CONSIDERED FOR ANOTHER OPEN POSITION WITHIN THE PARKS AND RECREATION WITHIN THE NEXT YEAR, YOU MUST CALL THE PARKS AND RECREATION OFFICE (413) 565-4160 AND IDENTIFY THE POSITION FOR WHICH YOU ORIGINALLY APPLIED AND THE POSITION FOR WHICH YOU WOULD NOW LIKE TO BE CONSIDERED.

Revised 08/27/2018
Approved 09/07/2011