



**UPPER BLACKSTONE WATER POLLUTION ABATEMENT DISTRICT
(District)
Employment Application**

APPLICANT INFORMATION			
Last Name		First	M.I. Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone		Alternate Phone	
Date Available	E-mail Address	Desired Salary	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?	
Do you know a current or past employee?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Name/Relationship	

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
Please list three professional references.	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT	
Company 01	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"/>	
Company 02	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"/>	
Company 03	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	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
I understand that the District may perform a background check on me in order to decide on whether to offer me a position.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date

Notes:

1. This application and/or an interview **do not** constitute an offer of employment.
2. The District is in compliance with the Americans with disabilities act.
3. It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment.