



**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	
<b>Please list three professional references.</b>	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

PREVIOUS EMPLOYMENT	
<b>Company 01</b>	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"/>	
<b>Company 02</b>	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"/>	
<b>Company 03</b>	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.