



Town of Plymouth Election Worker Application

Human Resources Department

26 Court Street, Plymouth MA 02360

Phone: 508-747-1620 Ext. 10101 Fax: 508-830-4140

www.plymouth-ma.gov aburchill@plymouth-ma.gov

An Equal Opportunity/Affirmative Action Employer

The Town of Plymouth is an equal opportunity employer and does not discriminate against any applicant because of race, color, religion, sex, marital status, national origin, age, disability, sexual orientation or genetic information, or any other class protected by federal, state or local law. Any person who needs assistance in fully participating in the application process should contact the Town of Plymouth Human Resources Department.

A fully completed application is required for all positions.

I. Contact Information

Name

Date

Address

City and State

Zip Code

Telephone

Email

II. Position Applying For (Please specify position title)

How did you hear about the position?

Have you ever been employed by the Town of Plymouth?

III. Employment of Minors

The Town of Plymouth is subject to certain child labor provisions regarding the employment of persons under the age of 18. Further, an Employment Permit or Educational Certificate may be required, depending on your age.

Are you under age 18? If yes, please indicate your age: _____

IV. Lie Detector Test

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 shall be subject to criminal penalties and civil liability.

V. Signature

CAREFULLY READ ALL PARTS OF THIS APPLICATION FORM BEFORE SIGNING.

- A. I understand that acceptance of this application by the Town of Plymouth does not imply that I will be employed.
- B. The information that I have provided is true and complete. I understand that misrepresentation or omission of any fact in my application, resume, or in any other materials or as provided during interviews, can be justification for refusal of employment or can be justification for termination from employment, if employed.
- C. I understand that any offer of employment that I receive from the Town of Plymouth is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Plymouth receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry if required, satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination.
- D. In processing my application for employment, the Town of Plymouth may verify all of the information provided by me concerning, among other things, my prior employment or military record, education, character, general reputation and personal characteristics.
- E. I authorize the Town to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting my present and former employers, by contacting individuals listed as business, educational or personal references, and by contacting other individuals to provide or further clarify information about me.
- F. I hereby release the Town, my present and former employers and all individuals contacted for factual information about me from any and all liability for damages arising from furnishing the requested information.
- G. If employed by the Town of Plymouth, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to undergo a physical examination, that I may be subject to drug and/or alcohol testing, that the Town may request a Criminal Offense Record Inquiry (CORI check) on me, investigate my driving record or verify my license(s) or certification(s) as required for employment at any time during my employment. I hereby authorize the Town to conduct a CORI check and/or SORI check on me as a condition of applying for a position with the Town, where applicable, and agree to sign a CORI/SORI Request Form reflecting my authorization of the CORI/SORI check. I further release the Town and its agents from any and all potential claims application associated with the Town's performing a CORI/SORI check on me in connection with my for a position with the Town. As a condition of employment an employee may be required to provide additional or updated information especially if this employee has been on workers comp and may require both drug testing and an employment physical in order to allow us to have the necessary information for making a proper decision or reasonable accommodations, if necessary.
- H. I understand that the Town of Plymouth is an at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.

My Signature Certifies That I Have Read and Agree with The Above Statements and All Statements Contained in This Application For Employment.

Applicant's Name (Please Print)

Applicant's Signature

Date