

APPLICATION FOR EMPLOYMENT WAREHAM FIRE DISTRICT WATER DEPARTMENT

Phone: 508-295-0450

http://www.warehamfiredistrict.org

An Equal Opportunity / Affirmative Action Employer

Thank you for your interest in employment with the Wareham Fire District – Water Department (Wareham Water). Wareham Water is an Equal Opportunity/Affirmative Action Employer. We assure you that your opportunity for employment with Wareham Water will be based only on your merit, without regard to race, color, religion, sex, marital status, national origin, age, disability, sexual orientation, or any other class protected by federal, state, or local law.

PLEASE NOTE: The Wareham Water accepts applications for advertised positions only. Applications must be returned to the address below by the advertised deadline for consideration.

INSTRUCTIONS: Each question should be fully and accurately answered. A resume may be attached, but "see resume" is not accepted in any field on this form. Please fill out the form, then print, sign and mail to:

Wareham Fire District – Water Department Human Resources 2550 Cranberry Highway Wareham, MA 02570

A separate application must be submitted for each position.

GENERAL				
Position applying for:		Date of application	(mm/dd/yyyy)	
Referral source:	☐ Online Ad	☐ Wareham Water Employee ☐ Other		□Relative
Date available for work:	(mm/dd/yyyy)			
Have you ever been employ If yes, list Department:	•	District?] Yes	□No
Dates of Service: From:	(mr	m/dd/yyyy) To:		(mm/dd/yyyy)
PERSONAL Name:	(Middle	,		(Last)
Address:	(City an	d State)		(Zip Code)
Mailing Address (if differen	nt):			
Telephone: Home	Cell		Email:	
Between 8:30A.M 4:30 P	.M.:			
Do you have a family mem	ber employed by the Ware	eham Fire District?	Yes	\square No
If yes, family member's nar	me?			

EDUCATION Graduated? ☐ Yes ☐ No **High School** Name: Address: Yes No **Vocational School** Name: Address: Major (s): Degree: ☐ Yes ☐ No **Undergraduate School** Name: Address:____ Major (s): Degree: ☐ Yes ☐ No **Graduate School** Name: Address: Major (s): Degree:___ Additional education and/or vocational, technical, or military training relevant to the position: SPECIAL SKILLS Check the column that you feel best describes your knowledge: Beginner Level Intermediate Level Advanced Level Knowledge of Personal Computers Knowledge of Word Processing Knowledge of Spreadsheets Knowledge of Databases **Knowledge of Graphics** Automated Accounting System Knowledge Bookkeeping Knowledge

Office machines you operate:
List any machinery or heavy equipment that you have operated efficiently:
Special qualifications and skills

LICENSES						
Do you have a valid driver's license (Class D Auto)? Yes No If yes, enter expiration date:						
Do you have a valid CDL license?						
What other valid licenses or certifications do you possess (job	related)?					
PRESENT AND PRIOR EMPLOYMENT (please do not v	vrite "see	resume")				
MOST RECENT EMPLOYMENT						
EMPLOYER						
Name:		May we contact this employer for references?				
		☐ Yes ☐ No				
Street Address:		Name:				
City:		Telephone:				
State:Zip:		Position:				
Supervisor:						
POSITION:						
Title:						
Employment dates: Description of Primary Duties:	From:_	(mm/dd/yyyy)To:(mm/dd/yyyy)				
Reasons for leaving:						
PREVIOUS EMPLOYMENT						
EMPLOYER						
Name:		May we contact this employer for references?				
C		Yes No				
Street Address:		Name:				
City:State:Zip:	_	Telephone:Position:				
Supervisor:		1 OSILIOII.				
POSITION						
Title:						
Employment dates: Description of Primary Duties:	From:	(mm/dd/yyyy)To:(mm/dd/yyyy)				
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Reasons for leaving:	
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EMPLOYER	
Name:	May we contact this employer for references?
Turne.	Yes No
Street Address:	Name:
City:	Telephone
State: Zip:	Position:
Supervisor:	
POSITION	
Title:	
Employment dates:	From:(mm/dd/yyyy)To:(mm/dd/yyyy)
Description of Primary Duties:	
D 6 1 '	
Reasons for leaving:	
EMPLOYER	
Name:	
	Yes No
Street Address:	Name:
City:	Telephone:
State:Zip:	
Supervisor:	
POSITION	
Title:	
Employment dates:	From:(mm/dd/yyyy)To:(mm/dd/yyyy)
Description of Primary Duties:	(IIIII dd yyyy) 10(IIIII dd yyyy)
2 43411ption of 1 1111mily 2 400001	
Reasons for leaving:	

EMPLOYER					
Name:		May we contact this employer for references?			
		Yes No			
Street Address:	<u></u>	Name:			
City:		Telephone:			
POSITION					
Title:					
Employment dates:	From:	(mm/dd/yyyy)To:	(mm/dd/yyyy)		
Description of Primary Duties:					
Reasons for leaving:					
OTHER INFORMATION Are you able to provide documented proof of U.S. citizenship the United States? Yes No	or valid w	ork permit as required upon emp	ployment to work in		

APPLICANT'S CERTIFICATION

I understand that all statements made in this application are true and complete under pains and penalties of perjury. I authorize the Wareham Water to investigate all statements made as part of this application and to secure any necessary information from all prior employers, references, academic institutions, and law enforcement agencies. I release all persons, employers, references, academic institutions, and law enforcement agencies from any and all liability arising from their giving and receiving information about my employment history, academic credentials, qualifications, or criminal record. I understand that any false answers or statements or misrepresentations by omission made by me as part of my application will be sufficient for rejection of my application, revoking of an offer or for my immediate dismissal should one be discovered after I am employed. I understand that federal law prohibits the employment of unauthorized aliens and that the Wareham Water has an obligation to make sure all employees, regardless of citizenship or national origin, are allowed to work in the United States. All persons hired must submit satisfactory proof of citizenship, permanent resident status or employment authorization and that failure to submit proof will result in denial of employment. I understand that Wareham Water follows an "employment at will" policy and nothing in this employment application, in the Wareham Water's statements of personnel guidelines or in my communication with any Wareham Water employee or official is intended to create an employment contract between Wareham Water and applicant. I understand that the employment is not guaranteed for a definite period of time and that some positions regarded as part-time and/or temporary are paid for actual hours worked and are not entitled to benefits offered to full-time positions (except FICA and Workers' Compensation).

My Signature Certifies That I Have Read And Agree With The Above Statements And All Statements Contained In This Application For Employment.					
Applicant Name (Please Print)					
Applicant Signature	Date				