



CITY OF PAWTUCKET

PERSONNEL DIVISION

137 Roosevelt Avenue

Pawtucket, RI 02860

(401)728-0500, Ext. 276

Fax (401)722-6211

Date: _____

APPLICATION FOR EMPLOYMENT

Personal Information

Cell Phone: _____

Home Phone: _____

Full Name: _____ E-mail: _____

Current Address: _____

No. Street City State Zip

How long have you lived at present address? _____

Previous Address _____

Position(s) applied for: _____

Do you prefer to work: _____ Full time _____ Part time

If your application is considered favorably, on what date would you be able to work? _____

Were you previously employed by us? _____ If so, under what name? _____

Are you under 18 years of age? _____

Is any member of your immediate family employed here? _____

Are there any experiences, skills, or qualifications which will be of special benefit in the job for which you are applying? (Applicant should not list any information that Federal and/or State Law precludes obtaining in the preemployment stage.) _____

Are you prevented from lawfully becoming employed in this country because of a visa or immigration status? ___ Yes ___ No (Proof of citizenship or immigration status will be required upon employment.)

RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Check Last Year Completed	Did you Graduate	List Diploma or Degree
High			1 ___	___ Yes	
			2 ___	___ No	
			3 ___		
			4 ___		
College			1 ___	___ Yes	
			2 ___	___ No	
			3 ___		
			4 ___		
Other					

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

List below present and past employment, Beginning with your most recent.
 You may include in such work history any verifiable volunteer work.

Name and Address of Company and Type of Business	From		To		Weekly	Weekly	Reason for Leaving
					Starting	Last	
					Salary	Salary	
Telephone: Supervisor:							
Describe the work you did:							

Name and Address of Company and Type of Business	From		To		Weekly	Weekly	Reason for Leaving
					Starting	Last	
					Salary	Salary	
Telephone: Supervisor:							
Describe the work you did:							

Name and Address of Company and Type of Business	From		To		Weekly	Weekly	Reason for Leaving
					Starting	Last	
					Salary	Salary	
Telephone: Supervisor:							
Describe the work you did:							

Name and Address of Company and Type of Business	From		To		Weekly	Weekly	Reason for Leaving
					Starting	Last	
					Salary	Salary	
Telephone: Supervisor:							
Describe the work you did:							

I hereby give permission to contact the above employers concerning my prior work experience.

Signed _____

If there is a particular employer(s) you do not wish us to contact, please indicate which one(s).

REFERENCES: Give the names of three persons not related to you, whom you have known at least 1 year.

Name	Address	Business	Years Acquainted

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, creed, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability genetic information or military/veteran status. The laws of most states and many localities also prohibit some or all of the above types of discrimination, as well as, some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, gender identity or source of income. The Fair Credit Reporting Act imposes restrictions with respect to credit data.

PHYSICAL RECORD

Do you require any accommodations to perform essential duties? Yes ___ No ___

I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application shall be ground for dismissal.

I authorize investigation of all statements contained herein and references listed above to give you any and all information concerning my previous employment and any pertinent information they may have. Personal or otherwise, I release all parties from all liability for any damage that may result from furnishing same to you.

Date _____ Signature of Applicant _____

AUTHORIZATION OF INFORMATION RELEASE

Date: _____

TO WHOM IT MAY CONCERN:

Having made application for employment with the City of Pawtucket and desiring its investigators to be informed as to my previous record and character, I hereby authorize the release of official records to any representative of the City of Pawtucket bearing this document. That information includes, but is not limited to the following:

Employment records, military files, arrest records, license history files, educational records, academic achievement records, attendance reports, performance reports, background investigations, internal affairs files and disciplinary records.

I hereby direct you to release this information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of the City of Pawtucket.

Consent is granted for _____ to furnish the information described above to third parties in the course of fulfilling its official responsibilities.

I hereby release you, as custodian of such records, and any law enforcement or criminal justice agency, school, college, university or other educational institution from any and all liability for damage of whatever kind which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. Should there be any question as to the validity of this release, you may contact me as indicated below.

A photocopy of this release will be as an original thereof, even though said photocopy does not contain an original writing of my signature.

_____		_____
Full name (print)		Maiden Name (print)
_____	_____	_____
Date of birth	Social Security #	Telephone #

Current Address (print)		

City	State	Zip

Signature		

CITY OF PAWTUCKET

AFFIRMATIVE ACTION AND EQUAL EMPLOYMENT

TO BE COMPLETED BY APPLICANT ONLY

DATE: _____

NAME: _____

ADDRESS: _____
STREET CITY STATE ZIP

* Pursuant to the 1964 Civil Rights Act, any information provided by the applicant to the City is done so on a strictly voluntary basis, and in order to assist us in our efforts, we ask you to provide the below voluntary information.

MALE _____ FEMALE _____ POSITION SOUGHT _____

Please check any that apply:

WHITE _____ BLACK _____ HISPANIC _____

AMERICAN INDIAN/ALASKAN NATIVE _____ ASIAN AMERICAN/PACIFIC ISLANDER _____

DISABLED _____ DISABLED VETERAN _____ VIETNAM ERA VETERAN _____

WHITE: (not of Hispanic Origin) All persons having origins in any of the original people of Europe, North America or the Middle East

BLACK: (not of Hispanic Origin) All persons having origins in any of the Black racial groups in Africa

HISPANIC: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

AMERICAN INDIAN OR ALASKAN NATIVE: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

ASIAN OR PACIFIC ISLANDER: All persons having origins in any of the original people of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

DISABLED: All persons with a physical or mental disability that substantially impairs or restricts one or more of such major life activities as walking, seeing, hearing, speaking, working or learning. A history of such disability, or the belief on the part of others that a person has such a disability, whether it is so or not, also is recognized as a handicap by the regulation

The City of Pawtucket is committed to taking Affirmative Action to ensure equitable employment opportunities and equitable participation at all levels of the City government workforce by the various segments of the Community. The City will consider each applicant for employment or promotion specifically given consideration of his or her qualification and ability to perform work and to eliminate and prevent discrimination on the basis of race, religion, color, sex, age, handicap or national origin.