SAMPLE INITIAL WRITTEN APPLICATION FOR EMPLOYMENT - MASSACHUSETTS¹

[NAME OF EMPLOYER]

[Name of Employer] is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity/expression, ancestry, national origin, age, disability, handicap, pregnancy, genetics, veteran status or other protected status.

PERS	SONAL DATA:			Date:/	/
1.	Name:				
2.	Street:	First	Middle		
	City:		_State:	Zip Code	
3.	Home Telephone:		_ Mobile Telepho	one:	
4.	How Were You Referred To Us? Newspaper Ad School	,	Walk In Employe		Agency Other
	Name of Referral Source:				
5.	Are you legally authorized to wo	rk in the United	States?	Yes	No
	Note: If you are hired, you will be	e required to su	bmit proof of legal	right to work in th	ne United States.
6.	Are you over 18 years of age?		_Yes	No	
7.	If no, are you over 16 years of ag	;e?	Yes	No	
POSI	TION/AVAILABILITY:				
1.	Indicate the position for which yo	ou are applying:			
2.	Type of employment desired: Regular Ful Temporary Ful	II Time II Time	<u></u>	Part TimePart Time	
3.	Shift DesiredDay	Evening			
4.	Salary Desired				
5.	When could you start?				
6.	Have you ever worked for this Co	ompany before?	YesYes	No	
	If yes, please specify date, facility	y/division and l	ocation:		
7.	Have you ever applied for emplo If yes, please specify date, facility	yment with this y/division and le	Company before? ocation:	Yes	No

¹ This sample application form is provided for educational purposes only and does not constitute legal advice. The form needs to be tailored to each employer's unique situation and applicable law at the time and in the location where it is used. Consult with labor counsel before using this form. For more information, contact: Catherine E. Reuben / Hirsch Roberts Weinstein LLP / (617) 348-4316 / creuben@hrwlaywers.com © January, 2013

EMPLOYMENT HISTORY:

1. List below the names of all your employers (you may list volunteer positions as well as paid positions, if you wish). List present employer or most recent employer first. You may use the reverse side of this application, if necessary.

EMI	PLOYER	ADDRESS	DATES OF EMPLOYMENT		REASON FOR LEAVING	TITLE/NATURE OF WORK	NAME/TITLE OF IMMEDIATE SUPERVISOR	REFERENCE CHECKED BY: [COMPANY USE
			FROM:	TO:	22.21210	OF WORK	SCIENVISON	ONLY]
	Are you employ			No				
	If yes, may we in	nquire of your present emplo	yer?	Yes	No			
3.	Do you have any	y commitments to another em	nployer w	hich might	affect your employn	nent with us?		
4.	Ara vou subject	to any restrictive covenants f	rom prior	- amploym	ant such as agraemen	its to protect confid	antial or proprietary	
4.		agreements not to compete? I				its to protect confid	ential of proprietary	

REFERENCES:

Provide the following information regarding 3 persons not related to you who have known you longer than 1 year:

NAME	ADDRESS AND TELEPHONE NO.	BUSINESS	YEARS ACQUAINTED	REFERENCE CHECKED BY: [COMPANY USE ONLY]
1.				
2.				
3.				

EDUCATIONAL DATA:

TYPE OF SCH	OOL	NAME AND ADDRESS	MAJOR OR COURSE OF STUDY	GRADUATED (Y OR N)	DEGREE
High School:					
College:					
College:					
Graduate School:					
Trade/Business So	chool:				
Other:					
_	_	ial Study or Research Work:			
MISC	ELLA	NEOUS:			
1.	Were y	ou in the U.S. Armed Forces?			
	1b. 1c. 1d.	Dates of Duty? From: Rank at Separation: Briefly describe your duties:	To:		
Note:		ompany does not discriminate on the basis			
2.	organiz religio	list any other information you think would cations, activities, accomplishments, compon, sex, sexual orientation, gender identity ancy, genetics or other protected status.	uter skills, etc. Exclude all infor	mation indicative of ra	ce, color,

AGREEMENT: (Please read the following statements carefully).

I certify that all information on this application and any other material provided by me is true and complete. I agree that falsified information, misrepresentations or omissions on this application, or any accompanying resume or other materials will disqualify me from consideration for employment and will be considered justification for dismissal whenever discovered.

Unless otherwise noted, I authorize this Company or its agent to investigate and/or verify all information in this application, including contacting all persons, schools, current employer (if applicable), previous employers and other individuals or entities named herein (and those named on accompanying resume, if any). I hereby authorize my former employers and other third parties named on this application to release information pertaining to my work record, habits and performances. In doing so, I hereby release them and the Company and its agents from all liability which may flow from the release of such information.

0 00 1		oyment will be on an at-will basis, fo	
that if I am offered a p	osition, such offer will be subje	ect to my signing the Company's	Agreement.]
results of a backgroun	d check and that I will be requi	ired to sign a document authorizing si	uch background check.] [I understand
[OPTIONAL	L LANGUAGE IF APPLICABLE	E: I understand that employment wit	th the Company will be subject to the

understand that I will enjoy the right to terminate my employment at any time, and that the Company will similarly enjoy the right to terminate my employment, at any time, with or without cause. This status can only be modified by a written document setting forth such modification, signed by both me and an authorized representative of the Company I further acknowledge that I am expected to abide by all Company rules, regulations, and policies, written or unwritten, but that such rules, regulations and policies do not create a contract between me and the Company or otherwise restrict the right of either party to terminate the employment relationship.

Signature:	Date:

Note: 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.