

## 248 Boston Road, Billerica, MA 01821 **Phone:** (978) 671-0927 **Fax:** (978) 671-0927

## BillericaRec.com RecInfo@town.billerica.ma.us

## **Applicant Information** Date: Address: Street Address City State Zip Code Email: \_\_\_\_\_ Primary Phone: Yes No Are you over the age of 18? □ □ Date of Birth: Are you authorized to work in the United States? $\overset{\text{Yes}}{\Box}$ **Employment Desired** Position Applied for: Date Available: Have you ever been an employee of the Town of Billerica? If yes, where? \_\_\_\_\_ How did you hear about the position? \_\_\_\_\_ Education High School: \_\_\_\_\_ Address: \_\_\_\_ Years Attended: Did you graduate? College: \_\_\_\_\_\_ Address: \_\_\_\_\_ Years Attended: \_\_\_\_\_ Did you graduate? \_\_\_\_ Degree? \_\_\_\_ Any additional education or training?

	Empl	oyment History	
Employer:		May We Cor	Yes No htact? □ □
Address:			
City		State	Zip Code
Job Title:	Da	ates Employed:	
Reason for Leaving	:		
Employer:		Yes No May We Contact? □ □	
Address:			
City		State	Zip Code
Job Title:	Dates Employed:		
	<b>:</b>		
		References  o 3 professional references	
Name	Relationship	Phone Number	Years Acquainted
My signature ce	rtifies that I read and agree	Signature with all statements contomployment.	ained in this application for
Signature of Applican	t		Date
Printed Name			