

321 Zoar Road  
P.O. Box 462  
Rowe, Massachusetts 01367



E-mail: admin@rowe-ma.gov  
Phone: 413-339-5520 x11  
Fax: 413-339-5316

**Town of Rowe**  
**EMPLOYMENT APPLICATION**

Position Applied For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Initial

Mailing Address: \_\_\_\_\_  
Town State Zip

Telephone Number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Have You Previously Been Employed By the Town of Rowe?  Yes  No

If Yes: \_\_\_\_\_ / \_\_\_\_\_  
Month/Year (Most Recent Employment) Position (Most Recent Employment)

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**Person to Be Notified In Case Of Emergency:**

Name: \_\_\_\_\_ Telephone Number: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

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**Personal Information:**

Are You a United States Citizen?  Yes  No Highest Grade Level Completed: \_\_\_\_\_

Awards and Honors: \_\_\_\_\_

Special Training: \_\_\_\_\_

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**Military Service Record:**

Branch: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_ Reserve Status:  Active  Inactive

Reserve Rank: \_\_\_\_\_ Was Discharge Other Than Honorable? \_\_\_\_\_

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**Driver's License Information:**

Do You Have A Valid Driver's License?  Yes  No If Yes, From What State? \_\_\_\_\_

Do You Have A Clean Driving Record?  Yes  No If No, Please Explain: \_\_\_\_\_

Do You Have Valid Automobile Insurance?  Yes  No Company Name: \_\_\_\_\_

**Employment References**

| Name | Address | Occupation | Length of Acquaintance |
|------|---------|------------|------------------------|
|      |         |            |                        |
|      |         |            |                        |
|      |         |            |                        |

**Employment History**

*List Present or Last Employer First*

| Name | Address | Dates of Employment<br>(Month & Year) | Position Held | Hourly Rate | Reason For Leaving |
|------|---------|---------------------------------------|---------------|-------------|--------------------|
|      |         | From: _____<br>To: _____              |               | \$ _____    |                    |
|      |         | From: _____<br>To: _____              |               | \$ _____    |                    |
|      |         | From: _____<br>To: _____              |               | \$ _____    |                    |

Other Job Experience and/or Qualifications You May Wish To List: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.*

*I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Town of Rowe is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Town of Rowe. In the event of employment, I understand that false or misleading information given in my application of interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_