

**→ IMPORTANT ←  
PLEASE READ CAREFULLY**

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.

**EMPLOYMENT AT WILL**

I understand this application is not an employment contract nor can it be used to create a contract. Employment by *Whittier Street Health Center* is at-will, has no specific term, regardless of length of service, and may be terminated by the employee or *Whittier Street Health Center* at any time. I acknowledge that *Whittier Street Health Center* has not made any promises or representations that differ from those contained in this paragraph.

**REFERENCES**

I hereby authorize *Whittier Street Health Center* to make investigations, check references and conduct security checks including CORIs (Criminal Offender Record Information) regarding this application for employment. Further, I authorize any individual, company, business entity, institution, or government agency having relevant information to furnish *Whittier Street Health Center* with that information.

I hereby release and agree to hold harmless any individual, company, business entity, institution, or government agency from all liability with regard to furnishing that information to *Whittier Street Health Center*. Further, I hereby agree to release and hold *Whittier Street Health Center* harmless from all liability with respect to the receipt of such information.

I have read and understand all the above limitations on and conditions of my employment and authorize the investigations, etc. referred to above.

**PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS DOCUMENT**

I have been informed of the company's policy of nondiscrimination in employment. I certify that the answers given by me to all of the questions in this application and any attachments including a resume are to the best of my knowledge and beliefs true and correct, and that I have not knowingly withheld any pertinent facts or circumstances. I understand that I will be subject to immediate dismissal or refusal to hire if *Whittier Street Health Center* at any time discovers any falsifications, admissions or misrepresentations in this application, or in any other application related materials submitted by me.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

Thank you for your interest. *Whittier Street Health Center* is an equal opportunity employer.

**EMPLOYMENT APPLICATION**

**Personal Data**

Last Name	First Name	M.I.	Social Security	Business Phone ( )
				May we call you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address		City	State	Zip
				Residence Phone ( )
Other Names Used		Can you, after an offer of employment, submit proof of your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No Upon hire you will be asked to show proof of legal authorization to work in the U.S.		Cell Phone ( )

**Types of Work Desired**

Please indicate the type of position(s) you desire				Salary Desired
_____				Date Available
_____				
_____				
_____				
If required, are you available to work:				
	Yes	No		
Full Time	<input type="checkbox"/>	<input type="checkbox"/>	Have you previously applied for employment at WSHC?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, Date _____
Part Time Only	<input type="checkbox"/>	<input type="checkbox"/>	Have you previously been employed by WSHC?	<input type="checkbox"/> <input type="checkbox"/> If Yes, Date _____
Summer Only	<input type="checkbox"/>	<input type="checkbox"/>	How were you referred to WSHC?	
Temporary	<input type="checkbox"/>	<input type="checkbox"/>	Ad <input type="checkbox"/> Employee <input type="checkbox"/> College <input type="checkbox"/> Agency <input type="checkbox"/> State EDD <input type="checkbox"/> Self <input type="checkbox"/> Other <input type="checkbox"/>	
Per Diem	<input type="checkbox"/>	<input type="checkbox"/>	Name of Employee/Source	

**Training and Education**

Name and Location (You need not furnish school name if it indicates religious affiliation.)	Dates Attended		Diploma/Degree	Field of Study	Overall Scholastic Average
	From	To			

## Employment History

Please list your employment history beginning with your most recent position. If an item is included in your resume, please write, "see resume". Please use additional sheets if necessary. Include Military Service if applicable. You may also list volunteer positions.

Current Employer	Address	Telephone No.	Ext.	From (mo./yr.)	To (mo./yr.)
Starting Position	Last Position			Starting Base Salary	per
Description of Duties				Final Base Salary	per
				May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Supervisor	Title		Telephone/Ext.		
Reason for leaving					

Employer	Address	Telephone No.	Ext.	From (mo./yr.)	To (mo./yr.)
Starting Position	Last Position			Starting Base Salary	per
Description of Duties				Final Base Salary	per
				May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Supervisor	Title		Telephone/Ext.		
Reason for leaving					

Employer	Address	Telephone No.	Ext.	From (mo./yr.)	To (mo./yr.)
Starting Position	Last Position			Starting Base Salary	per
Description of Duties				Final Base Salary	per
				May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Supervisor	Title		Telephone/Ext.		
Reason for leaving					

Employer	Address	Telephone No.	Ext.	From (mo./yr.)	To (mo./yr.)
Starting Position	Last Position			Starting Base Salary	per
Description of Duties				Final Base Salary	per
				May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Supervisor	Title		Telephone/Ext.		
Reason for leaving					

<b>Other Skills and Experience</b>	
Language(s)	_____
Other special skills or courses	_____
	_____

<p><b>Have you ever been convicted of a felony?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please explain: (An applicant will not be disqualified by non-job related convictions)</p> <p>_____</p> <p>_____</p> <p><b>Note:</b> An application for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests or criminal court appearances and adjudication in all cases of delinquency or as a child in need of service which did not result in a complaint transferred to the superior court for criminal prosecution. A conviction will not necessarily disqualify you for the job for which you have applied.</p>
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## Professional References

Please give the names of at least three people in your field who know you and can provide information regarding your job related capabilities. Please include at least one recent Supervisor.

Name	Professional Relationship with this Person	Occupation/Company	Address/Telephone Business

\*\* Please note: All references must be professional only. You must list a current manager, if applicable, or at least one previous manager. Supervisors are preferred as well, and a former colleague may be used. A minimum of 3 references must be provided, and no personal references from friends will be accepted\*\*