



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF HUMAN RESOURCES
MUNICIPAL LABOR SERVICE APPLICATION
City of Fall River
One Government Center
Fall River, MA 02722
508-324-2661

For Official Use Only

Employment Application
An Equal Opportunity Employer

Applicants must be at least 16 years of age at the time of filing an application. Please **PRINT CLEARLY** all answers on this application, and file it by mail or in person at the above address. **(INCOMPLETE OR UNSIGNED APPLICATIONS WILL NOT BE ACCEPTED).**

Labor Service registration is valid for **FIVE YEARS** subject to all provisions of Civil Service Law and Rules. If you wish to renew your registration beyond that time, you must notify the Human Resources Department in writing no earlier than six months before, or no later than six months after the fifth anniversary of your registration. Failure to provide such notification will result in removal from the labor registration list.

Date: _____

Name: _____
Last First Middle

Address: _____
Number and Street City/Town State Zip Code

Telephone (____) _____ Social Security Number: _____

Cell Phone Number (____) _____ E-mail Address: _____

Emergency Notification:

Name	Address	Relationship	Telephone Number
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Are you over the age of 16? Yes ___ No ___

Can you perform the essential functions of the job with or without reasonable accommodations? Yes ___ No ___
(see job description)

Are you a United States citizen or do you have the legal right to work in the United States? Yes ___ No ___

VETERANS PREFERENCE

A Veteran who served in the Military of the United States during wartime for more than 180 consecutive days, other than for training. (ADT)

If you are claiming veteran's preference, you must submit a copy of your DD-214.

EDUCATION

Have you completed a course in a building, mechanical, maintenance or repair trade in a recognized trade, vocational or technical school or a recognized training program? If the answer is "yes" complete the following:

<u>Name of School or Program</u>	<u>Title of Course</u>	<u>Date of Completion</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

LICENSES

List your Massachusetts Motor Vehicles Operator's License (specify class) and any other trade licenses, registrations or certificates, which are required for the position(s) for which you are applying.

<u>Name of Class</u>	<u>License No.</u>	<u>Expiration Date</u>	<u>Issued Registration or Certificate</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PREVIOUS EMPLOYMENT

Please list your most recent employer first, and account for any gaps in employment. You may include any verified work performed on a volunteer basis. Attach additional sheets if necessary, or a resume.

<u>Name and Address of Employer</u>	<u>Type of Work</u>	<u>Dates of Employment</u>	<u>Reason for Leaving</u>

REFERENCES

Please give three professional references.

<u>Name and Address</u>	<u>Company</u>	<u>Years Acquainted</u>	<u>Telephone No.</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please indicate which positions you are applying for by placing a check mark next to the mini class code.

CLASS I – ENTRY LEVEL

NO EXPERIENCE OR ENTRANCE REQUIREMENTS

Mini-class code	Title
() 3502A	Laborer
() 3502B	Working Foreman Laborer
() 6959A	Store Room Helper
() 7408A	Cafeteria Helper
() 7502A	Laboratory Helper

CLASS II – SKILLED LABORER POSITION TITLES

ONE-YEAR EXPERIENCE EXCEPT WHERE OTHERWISE NOTED

Mini-class code	Title	Mini-class code	Title
() 3503B	Senior House Worker	() 5042B	Tree Climber (practical test also needed)
() 3504A	Grounds Maintenance Person	() 5402B	Second Class Steam Fireman
() 3504B	Grounds Worker	() 5403B	Incinerator Utility Person/MEO (Mass Class III License required)
() 4142A	Traffic Maintenance Person	() 5703A	Motor Equipment Operator (Mass Class I or II License required)
() 4142B	Working Foreman Traffic Maintenance Person	() 5703B	Heavy Motor Equipment Operator (Mass Class I or II License required)
() 4206B	Plumber’s Helper	() 5703C	Special Heavy Motor Equipment Operator (Mass Class I or II License required)
() 4240B	Water Meter Repair Helper	() 5703E	Working Foreman Motor Equipment Operator
() 4243D	Water System Maintenance Person	() 5703F	Working Foreman Heavy MEO
() 4243O	Working Foreman Water System Maintenance	() 5710A	Hoisting Equipment Operator (requires hoisting equipment License issued by the Department of Public Safety)
() 4243E	Sewer System Maintenance Person	() 6990A	Stores Delivery Person
() 4243P	Working Foreman Sewer System Maintenance		
() 4749B	Mechanical Handyman		
() 4752B	Building Maintenance Person		
() 4752D	Working Foreman Building Maintenance		
() 5004B	Cemetery Maintenance Person		
() 5005B	Park Maintenance Person		

CLASS III – MECHANIC AND CRAFTSMAN POSITION TITLES

ONE-YEAR EXPERIENCE EXCEPT WHERE OTHERWISE NOTED

Mini-class code	Title	Mini-class code	Title
() 4240D	Water Meter Tester	() 2549A	Signal Maintenance
() 4243A	Water System Maintenance Craftsman	() 2549D	Working Foreman Signal Maintainer
() 4243L	Working Foreman Water System Maintenance Craftsman	() 3305A	Parking Meter Repair – (practical text only)
() 4403A	Compositor	() 3305B	Working Foreman Parking Meter Repairman
() 4607A	Carpenter	() 4102A	Painter
() 4607C	Working Foreman Carpenter	() 4102C	Working Foreman Painter
() 4752A	Building Maintenance Craftsman	() 4104A	Sign Painter
() 5004A	Cemetery Maintenance Craftsman	() 4206A	Plumber (master plumber’s license issued by the Board of State Examiners of Plumbers and Gas Fitters)
() 5005A	Park Maintenance Craftsman	() 4240A	Water Meter Repair Person
() 5005D	Working Foreman Park Maintenance Craftsman	() 4240C	Water Meter Installer
() 5841A	Motor Equipment Repair Person	() 5350A	Reservoir Caretaker
() 5877A	Fire Apparatus Repair Person – (two years experience as a Motor Equipment Repair person (and a practical test).	() 7402A	Baker
		() 7404A	Cook
		() 7404C	Senior Cook
		() 5348F	Working Foreman – Sewerage Paint Maintenance Man

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.

CERTIFICATION AND AGREEMENT

Please read carefully before signing.

I CERTIFY that all entries on this application for employment, and attachments, are true and complete. I understand that any falsifications of information herein, material half-truths, misstatements or omissions, regardless of their time of discovery, may cause forfeiture on my part to any employment with the City of Fall River. I understand that all information on this application is subject to verification and I consent to the contacting of references, former employers, educational institutions, military record, general reputation and personal characteristics regarding this application.

I understand and agree that the City of Fall River is an at-will employer and therefore, my employment is for no definite period and that I can be terminated at any time without notice, unless otherwise provided by civil service or a collective bargaining agreement, regardless of the method of wage/salary payment. I understand that an offer of/or employment by the City of Fall River is **conditional upon** satisfactory references; completion of a pre-employment physical exam which includes a drug test, and proof of citizenship or immigration status. I hereby also authorize the City of Fall River to conduct a CORI and/or credit check. Where applicable I agree to sign a CORI and/or Credit Request Form reflecting my authorization of the CORI and/or credit check. As a condition of employment an employee may be required to provide additional or updated information and may require both drug test and employment physical in order to allow us to have necessary information for making a proper decision or reasonable accommodations, if necessary.

My signature certifies that I have read and agreed with the above statements and all statements contained in this employment application.

Applicant Signature

Date

Print Name