



MASSDEVELOPMENT

Application for Employment

An Equal Opportunity/Drug-Free Employer

We are an equal opportunity employer and do not discriminate against any applicant because of race, color, religion, sex, national origin, age, disability, sexual orientation, marital status, or any other class protected by federal, state or local law. It is unlawful 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.

Please Return to:
MassDevelopment Finance Agency
ATTN: Human Resources
99 High Street, 11th Floor
Boston, MA 02110
Fax: (617) 603-3112
E-mail: jobs@massdevelopment.com

Personal Data

Last Name: _____ First Name: _____ Middle Initial: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

How or by whom were you referred? _____

Position Desired: _____

Have you previously applied at MassDevelopment? Yes No

If Yes, please provide dates: _____

If you are under 18, could you furnish a work permit? Yes No I am over 18.

Are you legally authorized to work in the United States? Yes No

(If hired, you will be required to submit proof of your identity and legal work authorization as a condition of employment.)

Do you have any relatives employed at MassDevelopment? Yes No

If Yes, please provide names and locations: _____

Have you ever been employed by MassDevelopment? Yes No

If Yes, please provide dates and locations: _____

Do you have specific salary requirements? Yes No

If Yes, please provide your salary expectation: _____

Employment Data

Date available for work: _____ Total hours available per week: _____

Type of Hours: Full Time Part Time Days * Nights * Regular Temporary **

* Days / Hours Available: _____ ** As of what date will you no longer be available to work? _____

Will you work overtime if necessary? Yes No If yes, how many hours per week? _____

Are there any days or hours you are unable or unwilling to work? _____

Do you have reliable transportation to and from work? Yes No

What is the most amount of time you wish to spend commuting to work? _____

Will you travel? Yes No If yes, what percent of your time? _____

Are you willing to relocate? Yes No If yes, where? _____

Education

High School Name: _____ City: _____ State: _____

Did you receive a diploma or GED? Yes No

Undergraduate / Graduate Schools *(List all schools attended, whether or not degree was obtained.)*

| School Name | City / State | Major | Minor | Degree |
|-------------|--------------|-------|-------|--------|
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| | | | | |
| | | | | |
| | | | | |

Academic honors, awards, or special recognitions: _____

Other schools / studies / courses not listed above: _____

Do you have any objection to us contacting your previous schooled? Yes No

If Yes, please explain why: _____

Professional Licenses & Certifications

If you are applying for a position that requires a professional license or certification, do you have a current license to practice in Massachusetts? Yes No

If yes, please indicate type and expiration date: _____

Please list any other current licenses or certifications: _____

If you are applying for a position that requires operating a commercial vehicle, you MUST have a valid Massachusetts Commercial Drivers License.

Employment History

| | | | |
|---------------------------------|--|----------------------------|--|
| Current / Most Recent Employer: | | Dates Employed: | |
| Address, City, State: | | Job Title: | |
| Supervisor's Name: | | Duties & Responsibilities: | |
| Company Phone Number: | | | |
| Reason for Leaving: | | | |
| May we contact? | <input type="radio"/> Yes <input type="radio"/> No | | |
| Prior Employer #1: | | Dates Employed: | |
| Address, City, State: | | Job Title: | |
| Supervisor's Name: | | Duties & Responsibilities: | |
| Company Phone Number: | | | |
| Reason for Leaving: | | | |
| May we contact? | <input type="radio"/> Yes <input type="radio"/> No | | |
| Prior Employer #2: | | Dates Employed: | |
| Address, City, State: | | Job Title: | |
| Supervisor's Name: | | Duties & Responsibilities: | |
| Company Phone Number: | | | |
| Reason for Leaving: | | | |
| May we contact? | <input type="radio"/> Yes <input type="radio"/> No | | |

Pre-Employment Testing

I understand that any offer of employment with MassDevelopment will be contingent upon my successful completion of any post-offer pre-employment physical examination MassDevelopment may require. I also understand and agree that I may be required to undergo and successfully pass a screening for alcohol and/or drugs during the hiring process and, if employed, as required by the Agency.

Signature: _____

Date: _____

Acknowledgement & Signature

Please read the following carefully before signing:

1. I understand that the receipt of this application does not imply that I will be employed.
2. The statements and information furnished by me in this application are true and complete. I understand that I will be subject to immediate dismissal or refusal to hire if at any time MassDevelopment discovers any material falsification, omission or misrepresentation of fact in this application.
3. I authorize MassDevelopment to conduct a background inquiry to verify the statements and information on this application, other documentation that I have provided and other areas that may include prior employment, consumer credit, criminal convictions, motor vehicle history and other reports. I authorize all previous employers or other persons who have knowledge of me, or my records to release such information to MassDevelopment. I hereby release any individual, agency and MassDevelopment from all claims or liabilities whatever that may arise from the disclosure of such information.
4. I understand that I may be required, depending upon my position, to sign a non-compete, confidentiality, and/or business ethics agreement as a condition of my employment.
5. I understand that all employees of MassDevelopment are employees at will. If hired, I will be free to resign at any time. Likewise, MassDevelopment will have the right to terminate my employment at any time with or without any reason or notice, regardless of the date of payment of my wages or salary. Neither this application, the Employee Handbook, nor any other documents given to employees is intended to create nor should such documents be constructed as creating an express or implied contract.
6. Any offer of employment is contingent upon favorable results from background and reference checks.

My signature below certifies that I have read and understand the above statements.

Signature: _____

Date: _____

References

| | | | | | |
|-----------------------|--|-------------|--|-----------------|--|
| Last Name: | | First Name: | | Middle Initial: | |
| Position Applied For: | | | | Location: | |

Professional References

Please list three professional references who can verify your work history and performance. References should not be relatives and at least two of the three must have directly supervised you at some point in your work history.

| | | | |
|---------------------|--|-------------------|--|
| 1. Supervisor Name: | | Title: | |
| Company Name: | | | |
| Company Address: | | | |
| Company Phone: | | | |
| Supervisor Phone: | | Supervisor Email: | |

| | | | |
|---------------------|--|-------------------|--|
| 2. Supervisor Name: | | Title: | |
| Company Name: | | | |
| Company Address: | | | |
| Company Phone: | | | |
| Supervisor Phone: | | Supervisor Email: | |

| | | | |
|---------------------|--|-------------------|--|
| 3. Supervisor Name: | | Title: | |
| Company Name: | | | |
| Company Address: | | | |
| Company Phone: | | | |
| Supervisor Phone: | | Supervisor Email: | |

Personal References

Please list two personal references. References should not be relatives.

| | | | |
|------------------------------|--|-------------------|--|
| 1. Name: | | Phone: | |
| Address: | | | |
| Occupation: | | Years Acquainted: | |
| How do you know this person? | | | |

| | | | |
|------------------------------|--|-------------------|--|
| 1. Name: | | Phone: | |
| Address: | | | |
| Occupation: | | Years Acquainted: | |
| How do you know this person? | | | |



MASSDEVELOPMENT

99 HIGH STREET, 11TH FLOOR
BOSTON, MA 02110

NOTICE & CONSENT FOR THE PROCUREMENT OF A CONSUMER AND/OR INVESTIGATIVE REPORT FOR EMPLOYMENT PURPOSES

I, the undersigned consumer, do hereby authorize **MassDevelopment** to procure a consumer report and/or investigative consumer report on me. I understand that **MassDevelopment** may utilize a consumer-reporting agency to perform this service.

I understand that the above-mentioned reports may include, but are not limited to, information concerning my employment history, education, character, general reputation, credit history, judgments, liens, driving history, social security number, criminal/civil history and any other public records.

I understand such information may be obtained by direct or indirect contact with former employers, schools, financial institutions, landlords, public agencies as well as through personal interviews with my references, associates, or other persons who may have such knowledge.

I understand that upon written request, I will be informed whether or not an investigative report was requested, and if a report was requested, I will be informed of the name and address of the consumer reporting agency that furnished the report.

I understand that this consumer report or investigative consumer report will be utilized by **MassDevelopment** for the purposes of evaluating me for employment, retention, promotion or reassignment. I also understand that if I am denied employment or adverse employment action is taken against me based wholly or in part on information obtained from this consumer report, that I will be notified by **MassDevelopment**. In such event, **MassDevelopment** will provide me with a copy of the consumer report along with a description of my rights under the Fair Credit Reporting Act and applicable state and federal laws.

I hereby release **MassDevelopment**, its agents, and any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, by me, my heirs or others making such a claim or demand on my behalf, for providing a consumer report and/or investigative consumer report hereby authorized. I understand that this Notice & Consent form shall remain in effect for the duration of my employment with **MassDevelopment** and shall serve as ongoing authorization to procure a consumer report at any time during the course of my employment.

Printed Name: _____

Signature: _____ Date: _____