

***Town of Tisbury***  
***Police department***  
***Employment Application***  
PO Box 1239, 51 Spring St. Tisbury, MA 02658  
508.696.4200  
www.tisburyma.gov

**An Equal Opportunity/Affirmative Action Employer**

The Town of Tisbury is an equal opportunity employer and does not discriminate against any applicant based on race, religion, sex, marital status, national origin, age, disability, sexual orientation or any other class protected by federal, state or local law. Any person who needs assistance in fully participating in the application process should contact the Town of Tisbury Personnel Director.

**Please complete the entire application** ("See resume or see attached" is not accepted).

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***I. Contact Information.***

Name _____		Telephone _____
Mailing Address _____	City and State _____	Zip Code _____
Street Address _____	City and State _____	Zip Code _____
Social Security Number _____		Emergency Contact Name and Phone Number _____

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***II. Position applying for (Please specify position number, position title or job category):***

Permanent Officer \_\_\_\_\_ Special Police Officer \_\_\_\_\_ Traffic Officer \_\_\_\_\_  
Crossing Guard \_\_\_\_\_ Other \_\_\_\_\_

Have you ever been employed by the Town of Tisbury? When, and Which department?

***III. Residence History***

Landlord/Parents	Address, City , State	Years Resided	Dates

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**IV. Education.**

School Name	Address, City , State	Years Attended	Degree
High School			
College			
Graduate School			
Trade, Business, Night Courses			
Military Service, Other Training			

List any awards, special recognitions or abilities you may possess.

**V. Military Service and Licenses.** A valid Driver's License may be a condition of employment, where required.

Are you currently in the Reserve? \_\_\_\_\_, Branch \_\_\_\_\_,

Please provide a copy of Form DD-214 (Certificate of Release or Discharge from Active Duty).

Do you have a valid MA driver's license (Class D Auto)? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, expiration date \_\_\_\_\_

License number \_\_\_\_\_, From any other jurisdiction? \_\_\_\_\_

Do you have a valid CDL license (Class A or B)? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, expiration date \_\_\_\_\_

Other licenses or certifications you possess (job related)? \_\_\_\_\_

Other applicable licenses / training \_\_\_\_\_

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Have you ever been dismissed from a school or had disciplinary action taken against you, including scholastic probation? If yes, please explain \_\_\_\_\_

Have you ever been named as a defendant in any civil action as a result of actions or omissions by you at your workplace? If yes, please explain. \_\_\_\_\_

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**VI. Special Skills, Interest or Hobbies.**

Please list any other skills or abilities you feel may be job related: \_\_\_\_\_

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**VII. Employment History.** {please do not write "see resume"}

Please account for the last 4 positions you have held, starting with your present or most recent employer. You may include military service and any verifiable work performed as an intern or volunteer.

You ( ) may ( ) may not contact my present employer.

Employer	Address
Telephone	Title
Supervisor	Dates Worked
Salary Received	Reason for Leaving

Description of primary duties: \_\_\_\_\_

\_\_\_\_\_

Employer	Address
Telephone	Title
Supervisor	Dates Worked
Salary Received	Reason for Leaving

Description of primary duties: \_\_\_\_\_

\_\_\_\_\_

Employer	Address
Telephone	Title
Supervisor	Dates Worked
Salary Received	Reason for Leaving

Description of primary duties: \_\_\_\_\_

\_\_\_\_\_

Employer	Address
Telephone	Title
Supervisor	Dates Worked
Salary Received	Reason for Leaving

Description of primary duties: \_\_\_\_\_

Have you ever been dismissed or asked to resign from a job? If yes, please explain

**VIII. Business References:** (A minimum of 3 references is required. Please do not write "see resume")

Name	Address	Phone	Relationship
Name	Address	Phone	Relationship
Name	Address	Phone	Relationship
Name	Address	Phone	Relationship

**IX. Criminal History.** \* Read below before responding \*

A. Have you ever been convicted of a criminal offense? ☐ Yes ☐ No/no Record

If you answered Yes to the above, please state the date(s) of the charge(s) and final disposition(s).

**Under Massachusetts Law, you may answer "no record" above if any of the following circumstances are applicable:**

- A. (1) You have never been convicted for a violation of a criminal statute.
- (2) You have a first conviction for any of the following misdemeanors: (a) drunkenness, (b) simple assault, (c) speeding, (d) minor traffic violations, (e) affray, or (f) disturbance of the peace.
- (3) You have been convicted of misdemeanors where the date of conviction or the termination of incarceration, if any, occurred more than five years before the date of this application and you have not been convicted of a criminal offense within this five year period.
- (4) You have a felony or misdemeanor conviction which has been sealed pursuant to Massachusetts Law.
- (5) You have juvenile delinquency or child in need of services complaints which were not transferred to Superior Court for prosecution.

B. Town of Tisbury requires a Criminal Offense Record Inquiry (CORI check) on prospective employees for certain positions. Where required, this check will be performed regardless of criminal history information above.

C. A conviction will not necessarily be a bar to employment.

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**Drugs:** A "controlled substance" is a drug or substance in any schedule or class referred to in MGL Ch.94-C

Do you use any controlled substance or drugs? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what substance? \_\_\_\_\_

Have you used Marijuana, Cocaine, Amphetamine, Barbiturate, or any other controlled substance within the last 5 years?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what substance? \_\_\_\_\_

Have you used any controlled substances without a physician's prescription in the last 12 months?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what substance? \_\_\_\_\_

**X. Employment of Minors.**

The Town of Tisbury is subject to certain child labor provisions regarding the employment of persons under the age of 18. Further, an Employment Permit or Educational Certificate may be required, depending on your age. Are you under age 18? If yes, please indicate your age:

**XI. Medical Information.**

All offers of employment are conditional upon the satisfactory completion of a Health Questionnaire and conditional upon a physical examination, where required. Satisfactory fitness to perform the essential duties of the position is a condition of employment.

**XII. Pre-Employment Drug Testing.**

All offers of employment are conditional upon the satisfactory completion of a pre-employment drug test, where required. Satisfactory completion of a required drug or alcohol test is a condition of employment as outlined in the Drug and Alcohol Testing Policy of the Town of Tisbury.

**XIII. Lie Detector Test.**

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.

**XIV. Signature.**

*I have carefully read all parts of this application form prior to signing.*

A. I understand that acceptance of this application by the Town of Tisbury does not imply that I will be employed. (Exceptions to "A" is an employee filling out this application for promotional purposes only.)

B. The information that I have provided is true and complete. I understand that misrepresentation or omission of any fact in my application, resume, or in any other materials or as provided during interviews, can be justification for refusal of employment or can be justification for termination from employment, if employed.

C. I understand that any offer of employment that I receive from the Town of Tisbury is contingent upon my successful completion of the pre-employment screening process including but not limited to the Town of Tisbury receiving satisfactory references, a satisfactory criminal history and Criminal Offense Record Inquiry if required, satisfactory verification of driver's license or certifications where required and satisfactory completion of any required post-offer pre-employment drug test or physical examination. (Employees promoted into a grade 5 or higher position from a position that does not include drug testing will be added to the random drug testing list.)

D. In processing my application for employment, the Town of Tisbury may verify all of the information provided by me concerning, among other things, my prior employment or military record, education, character, general reputation and personal characteristics.

E. I authorize the Town to take whatever steps deemed necessary to obtain information regarding my qualifications for employment including contacting my present and former employers, by contacting individuals listed as business, educational or personal references, and by contacting other individuals to provide or further clarify information about me.

F. I hereby release my present and former employers and all individuals contacted for factual information about me from any and all liability for damages arising from furnishing the requested information.

G. If employed by the Town of Tisbury, I understand that as a condition of employment, I may be required to furnish additional or updated medical information, that I may be required to undergo a physical examination, that I may be subject to drug and/or alcohol testing, that the Town may request a Criminal Offense Record Inquiry (CORI check) on me, investigate my driving record or verify my license(s) or certification(s) as required for employment at any time during my employment. As a condition of employment an employee may be required to provide additional or updated information especially if this employee has been on workers comp and may require both drug testing and an employment physical in order to allow us to have the necessary information for making a proper decision or reasonable accommodations, if necessary.

H. I understand that the Town of Tisbury is an at-will employer. If employed, I understand that my employment may be terminated with or without cause at any time unless there is an applicable bargaining unit contract provision.

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

\_\_\_\_\_  
Applicant Name (Please Print)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## COMMONWEALTH OF MASSACHUSETTS

County of Dukes County

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_ (name of document signer), proved to me through satisfactory evidence of identification, which were \_\_\_\_\_, to be the person who signed the preceding or attached document in my presence, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge and belief.

\_\_\_\_\_  
Notary Public