



TOWN OF NORTHBRIDGE DEPARTMENT OF POLICE

1 HOPE STREET, WHITINSVILLE, MA 01588
www.northbridgepolice.com
TEL (508) 234-6211 • FAX (508) 234-9021



WALTER J. WARCHOL
CHIEF OF POLICE

TIMOTHY LABRIE
LIEUTENANT

EMPLOYMENT APPLICATION

The Town of Northbridge is an Affirmative Action/Equal Employment Opportunity Employer and does not discriminate based upon race, religion, gender, ethnic group, age, handicap, or political affiliation.

Date: ____/____/____ Social Security Number: _____

Name: _____
Last First Middle

Address: _____
Street Apt/P.O. Box
City/Town Zip Code

Telephone: _____ Are you a U.S. Citizen? Yes ____ No ____

Are you a minor? (under the age of eighteen) Yes ____ No ____

Position applying for: _____ Full Time ____ Part Time ____

Do you possess a valid driver's license? Yes ____ No ____

Date available to begin work: _____

Have you ever been convicted of a felony? Yes ____ No ____

Employment History:

Please list your complete employment history for the past five (5) years. Begin with your most recent position.

1. _____
Employer Address Telephone
Position Held Duties/Responsibilities Supervisor
2. _____
Employer Address Telephone
Position Held Duties/Responsibilities Supervisor
3. _____
Employer Address Telephone
Position Held Duties/Responsibilities Supervisor

If you need additional space to complete this section, please use a separate piece of paper and attach.

Did you graduate from high school? Yes ____ No ____

High School: _____
Name of High School *City, State*

Have you attended a college or university? Yes ____ No ____

College: _____
Name of College/University *City, State*

Degree Awarded? Yes ____ No ____ Program: _____

Graduate of, or attendance at, any other type of school? _____
(please explain)

Relevant experience, training, or special skills: _____

Are you a veteran of the U.S. Armed Services? Yes ____ No ____

Branch of Service: _____ Discharge Condition: _____

Occupational Specialty (MOS, AFSC): _____

Personal References:

Please list three individuals familiar with your character.

1. _____
Name *Address* *Telephone*

2. _____
Name *Address* *Telephone*

3. _____
Name *Address* *Telephone*

The Town of Northbridge may require a physical examination by the Town Physician prior to the start of employment.

All of the above information is true and factual to the best of my knowledge.

Signature of Applicant

Please attach one copy of resume.