

Turners Falls Water Department

Please read the following paragraphs before you sign this application.

By completing this application you specifically authorize and ask all of your present and former employers including representatives of these employers and those you have listed as professional references to provide the Turners Falls Water Department with information about your employment experience, work experience, work performance, reason(s) for termination, skills and abilities and other qualities related to your ability and qualifications for employment. You specifically release your present and former employers, including their representatives, as well as persons whom you have listed as professional references from any and all liability for damages arising from the furnishing of the requested information to the Turners Falls Water Department.

You acknowledge that the information that you are providing to the Turners Falls Water Department may be reviewed by individuals other than those whom you have directly provide the information.

You agree to sign a Criminal Offender Record Information Release form, as a condition of employment and further authorize the Turners Falls Water Department to conduct background checks that they deem necessary for evaluating your application for employment. Furthermore, you certify that you have made true, correct and complete answers and statements on this application and in other documents that you have provided to the Turners Falls Water Department, in the knowledge that they may be relied upon in considering your application, and you understand that any omission or falsification of any part of the application or any supplement to it will be sufficient grounds to decline employment or for discharge should you become employed with the Turners Falls Water Department.

I understand that employment with the Turners Falls Water Department is "at will" which means that either you or the Turners Falls Water Department can terminate the employment relationship at any time with or without prior notice, and for any reason not prohibited by statute or agreement. All employment is continued on that basis. You understand that no supervisor, manager or executive of the Turners Falls Water Department has authority to alter the foregoing.

I hereby acknowledge that I have read the above statement and understand it.

Signature

Date