

**CITY OF BROCKTON
MUNICIPAL LABOR SERVICE APPLICATION
45 SCHOOL STREET, BROCKTON, MA 02301**

Applicants must be at least 16 years of age at the time of filing an application. **TYPE or PRINT** all answers on both sides of this form in INK, and file it by mail or in person at the above address. **(INCOMPLETE OR UNSIGNED APPLICATIONS WILL BE RETURNED.)** The name of an applicant will remain on the Labor Service register for the job titles for which he or she is registered for a period of no more than 5 years from the date of registration, subject to a renewal of registration as provided in Section 28, Chapter 31 of the General Laws, and subject to compliance with other applicable provisions of the civil service law and rules. The Labor Service position titles including entrance requirements, if any, for which applicants may apply on this form are listed on the reverse side, together with instructions for indicating position selections.

1. Name _____ Date of Birth _____

2. Mailing Address _____
 No. Street City/Town Zip Code

3. Social Security No. _____ Telephone No. _____

4. Have you completed a course in a building, mechanical, maintenance or repair trade?
 If answer is "yes", complete the following:

<u>Name of School or Program</u>	<u>Title of Course</u>	<u>Date of Course(M/D/Y)</u>
_____	_____	_____
	From: _____	To: _____
_____	_____	_____
	From: _____	To: _____
_____	_____	_____
	From: _____	To: _____

5. Have you ever served in the United States' armed forces during wartime as defined by Clause 43, Section 7 of Chapter 4 and Section 1 of Chapter 31 of Massachusetts General Laws? Yes No **If yes, attach a copy of your DD214.**

6. Are you the unremarried spouse or parent of a veteran who died from a service-connected disability incurred in wartime service? Yes No

7. Response to the following is voluntary. (Failure to provide the information requested will not adversely affect your application.)

I am: Male Female
 I am: White Black Hispanic Asian Cape Verdean American Indian

8. Work Options: Permanent Temporary Part-time Intermittent Full-time

9. Employment History:

Name and Address of Employer	Type of work	Dates
		From: _____
		To: _____
		From: _____
		To: _____
		From: _____
		To: _____
		From: _____
		To: _____

10. If you wish to apply for any of the following job titles in the **Labor Class**, which do not require experience, place a check in the block before each job title you select.

- Laborer Cafeteria Worker Yardman

11. If you wish to apply for any of the following job titles in the **Skilled Labor Class**, place a check in the block before each job you select. Positions require 1 year of experience in related work within the 10 year period immediately prior to filing this application and **a notarized letter from a former employer verifying in detail your job description and dates of employment must be submitted in order to register for said position.**

- | | |
|---|--|
| <input type="checkbox"/> Plumber's Helper | <input type="checkbox"/> Electrician's Helper |
| <input type="checkbox"/> Carpenter's Helper | <input type="checkbox"/> Water/Sewer Maintenance Man |
| <input type="checkbox"/> Cemetery Maintenance Man | <input type="checkbox"/> Park Maintenance Man |
| <input type="checkbox"/> Highway Maintenance Man | <input type="checkbox"/> Building Maintenance Man |
| <input type="checkbox"/> Motor Equipment Operator
MA CDL A or B License | <input type="checkbox"/> Refuse Maintenance Man |
| <input type="checkbox"/> Hoisting Equipment Operator
Hoisting License | <input type="checkbox"/> Heavy Motor Equipment Operator
MA CDL B or C license |
| <input type="checkbox"/> Special Motor Equipment Operator
MA CDL A, B, or C & Hoisting License | <input type="checkbox"/> Groundskeeper |
| | <input type="checkbox"/> Greenskeeper |

12. If you wish to apply for any of the following job titles in the **Mechanical and Craftsman Class**, place a check in the block for each job title you select. Positions require two years' experience in related work within the 10 year period immediately prior to filing this application and **a notarized letter from a former employer verifying in detail your job description and dates of employment must be submitted in order to be registered for said position.**

- | | |
|--|--|
| <input type="checkbox"/> Signal Maintainer | <input type="checkbox"/> Glazier |
| <input type="checkbox"/> Mason | <input type="checkbox"/> Welder |
| <input type="checkbox"/> Carpenter | <input type="checkbox"/> Working Foreman Carpenter |
| <input type="checkbox"/> Painter | <input type="checkbox"/> Working Foreman Painter |
| <input type="checkbox"/> Sign Painter | <input type="checkbox"/> Head Groundskeeper |
| <input type="checkbox"/> Spray Painter | <input type="checkbox"/> Machinist |
| <input type="checkbox"/> Working Foreman Machinist | <input type="checkbox"/> Water Meter Repairman |
| <input type="checkbox"/> Highway Maintenance Craftsman | <input type="checkbox"/> Building Maintenance Craftsman |
| <input type="checkbox"/> Mechanical Equipment Repairman | <input type="checkbox"/> Cemetery Maintenance Craftsman |
| <input type="checkbox"/> Oil Burner Repairman
Requires a cert. of competency from
MA Dept. of Safety | <input type="checkbox"/> Air Conditioning and Refrigeration Repairman |
| <input type="checkbox"/> Motor Equipment Repairman | <input type="checkbox"/> Water Machinery Repairman |
| <input type="checkbox"/> Fire Apparatus Repairman
May require a practical test in
addition to experience required. | <input type="checkbox"/> Working Foreman Motor Equipment Repairman |
| <input type="checkbox"/> Head Greenskeeper | <input type="checkbox"/> Working Foreman Fire Apparatus Repairman |
| | <input type="checkbox"/> Pumping Station Operator (DPW Sewer) |
| | <input type="checkbox"/> Working Foreman Water System Maint. Craftsman |
| | <input type="checkbox"/> Working Foreman Sewer System Maint. Craftsman |
| | <input type="checkbox"/> Working Foreman Highway Maintenance Man |
| | <input type="checkbox"/> Working Foreman Parking Authority |

NOTE: An applicant who claims to meet the experience requirements of a position title in the Skilled Labor Class and/or Mechanical and Craftsman Class by virtue of the fact that they were self-employed, may be credited with such experience, provided that they submit proof of self-employment through submission of a notarized affidavit which sets forth the duties performed, the length of such employment and any further substantiating evidence such as billheads, letterheads, etc.

I declare that the information I have provided on this application is true, and I understand that falsification of any information is subject to the penalties for perjury.

Date

Applicant's Signature (Do not print-USE INK)

AFFIRMATIVE ACTION EQUAL OPPORTUNITY EMPLOYER