

BACKGROUND AUTHORIZATION

Name of Applicant: _____

Position Desired: _____

PLEASE LIST AT LEAST TWO (2) WORK RELATED OR PERSONAL REFERENCES.

Company: _____

Supervisor: _____

Address: _____

Tele #: _____

Email: _____

Company: _____

Supervisor: _____

Address: _____

Tele #: _____

Email: _____

Company: _____

Supervisor: _____

Address: _____

Tele #: _____

Email: _____

Signature: _____ Date: _____

In lieu of an actual signature, by submitting this online application I hereby acknowledge that 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 the City of Haverhill discovers any falsification, omission, or misrepresentation of fact(s) in this application.