

**Application for Employment**  
**Please submit resume and Application to [Careers@mscba.org](mailto:Careers@mscba.org)**

*THE MASSACHUSETTS STATE COLLEGE BUILDING AUTHORITY  
 IS AN EQUAL OPPORTUNITY, AFFIRMATIVE ACTION EMPLOYER  
 AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, RELIGION, COLOR,  
 SEX, SEXUAL ORIENTATION, AGE, NATIONAL ORIGIN, VETERAN STATUS,  
 DISABILITY, OR MEMBERSHIP IN ANY OTHER  
 CLASS PROTECTED BY APPLICABLE LAW*

**I. PERSONAL INFORMATION**

Last Name	First Name	M.I.	Email Address
Street Address	City, State	Zip Code	Telephone Number (home)  Telephone Number (other)
Referred by	Organization	Title	Telephone Number
Position Desired	Salary Desired	FT / PT	Date Available to Work

**II. EDUCATION**

Institution	City, State	Degree/Major
Institution	City, State	Degree/Major
Institution	City, State	Degree/Major

**III. EMPLOYMENT HISTORY**

Please list your employment history over the last ten years, starting with your most recent or current employer. Do not merely state "Refer to resume." Attach extra pages if necessary.

Current/Last Employer	Address	Position	Dates	Reason for Leaving
Employer	Address	Position	Dates	Reason for Leaving

Employer	Address	Position	Dates	Reason for Leaving
Employer	Address	Position	Dates	Reason for Leaving
Employer	Address	Position	Dates	Reason for Leaving
Employer	Address	Position	Dates	Reason for Leaving

**IV. OTHER EXPERIENCE**

Please describe any relevant personal or professional work skills and experience which you consider of value and which may assist the Authority in considering your application for employment. You may include volunteer experience.

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**V. WORK ELIGIBILITY – PLEASE READ CAREFULLY**

Have you previously worked for the Massachusetts State College Building Authority? If yes, indicate dates and title.

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Are any of your relatives employed by the Commonwealth of Massachusetts (which includes any department of state government, including the executive, legislative, or judicial, and all councils thereof and thereunder, and any division, board, bureau, commission, institution, tribunal, or other instrumentality within such department, and any independent state authority, district, commission, instrumentality, or agency, but does not include an agency of a county, city, or town)? For purposes of this question, a “relative” is a spouse, parent, child, or sibling, or the spouse of a parent, child, or sibling.

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Are you legally authorized to work in the U.S.? \_\_\_\_\_ If so, for what period? \_\_\_\_\_

*All persons who are offered a position with the MSCBA will be required to present documentation which establishes their U.S. citizenship or employment authorization.*

Have you ever been discharged by a previous employer or resigned after being told that your performance was unsatisfactory? If yes, please explain.

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**VI. REFERENCES** (Do not include names of relatives)

Please provide the following contact information for at least three references, primarily supervisors or colleagues who can attest to your professional experience.

Name	Occupation/Title	Address	Telephone Number	Email
Name	Occupation/Title	Address	Telephone Number	Email
Name	Occupation/Title	Address	Telephone Number	Email

1. All of the information that I have provided on this application is accurate to the best of my knowledge. I authorize the Massachusetts State College Building Authority to make any inquiries to determine my suitability for employment. In signing this application, I understand that my previous and present employers may be asked for information relative to my employment record with them. I hereby release from all liability or damage the Authority and its employees and agents, and those individuals who provide such information. I understand that any false statements made by me or my failure to answer any applicable questions on the application accurately (i.e., misrepresentation of prior employment, education, or training) will lead to immediate termination of employment.
2. I understand and agree that nothing in this application creates or shall be construed to create an employment contract or term or limit the reasons for or procedures for termination or modification of the employment relationship. I understand and agree that, if hired, my employment will be at-will, for no definite period, and may be terminated at any time with or without cause.
3. In connection with this employment application, the MSCBA may request that an independent report be prepared, which may include information as to my police record and other information which may be considered relevant to my employment with the MSCBA. I have the right to request that the independent agency completely and accurately disclose to me the nature and scope of the information requested. Such a request must be made in writing to the Chief Administrative Officer within a reasonable time after completion of this application.

4. This application will be given every consideration, but its receipt does not imply that the applicant will be employed. The MSCBA may conduct reference checks and confirm your employment record prior to extending an offer of employment.

**I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND PARAGRAPHS NUMBERED 1 THROUGH 4 ABOVE AND I HEREBY AGREE AND CONSENT TO SUCH REQUEST FOR INFORMATION AND OTHER ACTIONS WHICH THE MASSACHUSETTS STATE COLLEGE BUILDING AUTHORITY MAY TAKE AS DESCRIBED HEREIN.**

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**SIGNATURE OF APPLICANT**

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**DATE**

**Notice to Massachusetts Applicants**

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.

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***For Human Resources Department Use Only***

Interviewed by \_\_\_\_\_

Date \_\_\_\_\_

Interviewed by \_\_\_\_\_

Date \_\_\_\_\_

Interviewed by \_\_\_\_\_

Date \_\_\_\_\_