

TOWN OF HOPKINTON
APPLICATION FOR NON-SALARIED POSITION

Date _____

Name of Applicant: _____

Address of Applicant: _____

Contact Information

Telephone: _____ Cell phone: _____

Email address: _____

Position applying for _____

Applicable Qualifications: _____

References

Names

Addresses

Contact Information

Signature of Applicant

PLEASE NOTE: THE TOWN COUNCIL CONDUCTS ITS INTERVIEWS DURING EXECUTIVE SESSIONS. HOWEVER, YOU HAVE THE RIGHT TO REQUEST THAT THE TOWN COUNCIL HOLD YOUR INTERVIEW DURING OPEN SESSION. PLEASE CHECK THE AREA BELOW IF YOU WISH TO EXERCISE YOUR RIGHT TO HAVE YOUR INTERVIEW HELD IN PUBLIC DURING OPEN SESSION.

_____ **I wish to have my interview held during open session.**

For Office Use Only:

_____ Registered Voter

Required by Article 1231 of the Town Charter of the Town of Hopkinton, as amended.



POLICE DEPARTMENT • TOWN OF HOPKINTON

406 Woodville Road Hopkinton, RI 02833 • 401-377-7750 FAX 401-377-7755



David S. Palmer, Chief of Police

Criminal Background Check

FULL NAME: _____

MAIDEN NAME/ALIAS: _____

ADDRESS: _____

DATE OF BIRTH: _____ **SOCIAL SECURITY:** _____

I am seeking to join/volunteer with _____ and I hereby direct and authorize the Hopkinton Police Department to review any criminal record that is on file in reference to me. I hereby waive and release any and all manner of actions, cause of actions, and demands of every kind, nature and description, arising from any release of criminal records and requests there from, whatsoever against the State of Rhode Island or any municipality and the employees of the Hopkinton Police Department in both law and equity which I may now have or in the future may have.

Signature

Date

DO NOT FILL IN BELOW THIS LINE

In compliance with Rhode Island General Law 16-2-18.4, a statewide background check was conducted to determine if the above subject has a Rhode Island criminal record on file with the Rhode Island Attorney General. The results of this background check shows that:

_____ *has no disqualifying criminal record.*

_____ *has a disqualifying criminal record.*

Record: _____

Signature

Date