

Assessors Office – Residence____
Deed_____

Applicants must be Medford residents, age 62 years or older, who own a home in Medford and reside in that home. If your property is held in Trust, the applicant's name must appear as a trustee and a beneficiary of the Trust.

**CITY OF MEDFORD
SENIOR WORK PROGRAM**

DATE_____

NAME_____

ADDRESS_____

SS.#_____ DOB_____

TELEPHONE NUMBER_____

HAVE YOU EVER BEEN EMPLOYED BY THE CITY? YES____ NO____

IF YES, WHAT DATES AND WHAT DEPARTMENT_____

SPECIAL SKILLS OR QUALIFICATIONS

Please give a summary of any special skills or qualifications from prior employment or life experiences:

***This program is limited to 90 hours of service for a one-time abatement, unless otherwise authorized.**

SIGNATURE

Mail completed application to Medford City Hall, Room 204, 85 George P. Hassett Drive, Medford, MA 02155