



# Town of Stow

380 Great Road, Stow, MA 01775

Assessors: (978) 897-4597

COA: (978) 897-1880

## PROPERTY TAX VETERAN WORK-OFF PROGRAM

(General Laws Chapter 59 Section 5N)

### Fiscal Year **2025** APPLICATION

**(FOR APPLICANTS WHO PARTICIPATED LAST YEAR)**

This application is not open to Public Inspection

NAME: \_\_\_\_\_ TEL. #: \_\_\_\_\_

*PLEASE PRINT*

EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ STOW, MA 01775

DD214 Form Provided

Positions are available in a variety of Town Departments. Please indicate in which areas you would prefer to work. (Please check all potentials departments).

\_\_\_ COA Office \_\_\_ Town Building \_\_\_ Schools \_\_\_ Library Other: \_\_\_\_\_

Work History: Please attach a resume or list any significant work experience and/or education and training, past experiences, which might qualify you as a participant in this program. You may include any applicable hobbies and/or community and volunteer work. Please include the organization's name, job title, responsibilities and # of years of service.

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Do you have any medical or physical limitations that might limit your ability to do certain kinds of work? Please explain:

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What hours are you available to work? (Check all that apply.)

\_\_\_ Mornings \_\_\_ Afternoons \_\_\_ Evenings

What days of the week are you available to work? (Check all that apply.)

\_\_\_ Mondays \_\_\_ Tuesdays \_\_\_ Wednesdays \_\_\_ Thursdays \_\_\_ Fridays \_\_\_ Sat/Sun

What type of working conditions are you interested in? (Check all that apply.)  
[  Office  Outdoors] [  Independent  Interactive] [  Quiet  Busy]

What general type of work are you interested in? (Check all that apply.)  
 Clerical/Administrative  Physical Labor/Skilled Maintenance Other: \_\_\_\_\_

Do you have experience in any of the following areas? (Check any that apply.)

<input type="checkbox"/> Clerical/Secretarial	<input type="checkbox"/> Accounting	<input type="checkbox"/> Teaching
<input type="checkbox"/> Reception/Telephone	<input type="checkbox"/> Word Processing	<input type="checkbox"/> Data Entry
<input type="checkbox"/> Building/Grounds/Maint.	<input type="checkbox"/> Spreadsheets	<input type="checkbox"/> Computers

If you have experience with computers, please describe the type of computers and software programs used:

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EMERGENCY CONTACTS: (Please be sure to give the name, address, and phone # of **TWO** persons to be notified in case one cannot be reached).

NAME 1: \_\_\_\_\_ TEL. #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME 2: \_\_\_\_\_ TEL. #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

This application has been prepared or examined by me. Under the pains and penalties of perjury, I declare that to the best of my knowledge and belief, it and all accompanying documents and statements are true, correct, and complete.

If I am accepted as a participant in the Stow Property Tax Work-off Program, I understand that rate of pay cannot exceed the State minimum wage, which is currently **\$15.00** per hour for calendar year **2023** and tentatively **\$15.00** for calendar year **2024**. The maximum yearly benefit per household for **Veterans** is **\$1,500** and will be credited as a reduction to my Town of Stow Real Estate tax bill for fiscal year **2025**, after federal Medicare and OBRA deductions.

Participants **MUST** observe the rules of confidentiality. Confidentiality means that anything seen or heard during work assignments that relates to other town residents or employees **MUST NOT** be shared with anyone.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

The Town of Stow reserves the right to discontinue a volunteer's participation in the program if the Town deems the volunteer's participation to be detrimental to the volunteer, the program, or the Town.

Once completed, please return this application with a copy of your most recent Federal Income Tax Return to the Assessors' Office at 380 Great Road. You may not commence any assignment till the Board of Assessors has approved your participation in the Property Tax Work-off Program.

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*ASSESSORS' USE ONLY*

The applicant: \_\_\_ Meets or \_\_\_ Does Not Meet  
the qualifications for the Property Tax Work-Off Program.

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\_\_\_\_\_  
Board of Assessors

\_\_\_\_\_  
Date