

Town of Stockton Springs
217 Main Street, P.O. Box 339
Stockton Springs, Maine 04981
(207) 567-3404 * (207) 567-3710 fax

APPLICATION FOR EMPLOYMENT

The Town of Stockton Springs is an Equal Opportunity Employer. All applicants are considered for all positions without regard to race or color, sex, sexual orientation, disability, religion, age, ancestry or national origin, or any other legally protected status.

Please fill out all questions. Attach additional pages if necessary.

Position for which you are applying: _____

GENERAL

NAME: _____ DATE: _____
Last First Middle

ADDRESS: _____
Mailing City State Zip

HOME TELEPHONE: _____ BEST HOURS TO REACH YOU: _____

CELL PHONE: _____ Are you age 18 or older? YES NO

EMAIL ADDRESS (OPTIONAL): _____

Were you ever convicted by a court of an offense other than a traffic violation? YES NO If yes, give details.

Are you eligible to be lawfully employed in the United States? YES NO
(Proof of citizenship or immigration status will be required upon employment)

Driver's License? YES NO License Number: _____

Class: _____ Endorsements: _____

EDUCATION

Name and Location of High School: _____

Did you graduate? YES NO

College or University: _____

Did you graduate: YES NO Degree: _____

Graduate Study, Business, Correspondence, Trade School, or other Education:

Describe: _____

Did you graduate? YES NO Degree/Certificate: _____

OTHER

How did you learn of this position? _____

- Advertisement
 Employment Agency
 Walk-in
 Friend/relative

Other, please specify _____

EMPLOYMENT HISTORY- List previous four employers beginning with the most recent.

Employer’s Name: _____

Employer’s Address: _____

Address
City
State

Dates of Employment: From: _____/_____/_____
Month Year
 To: _____/_____/_____
Month Year

Position Title: _____ Salary: Starting \$ _____/hr Ending \$ _____/hr

Duties Performed: _____

Reason for Leaving: _____

Name and Title of Supervisor: _____

May We Contact Employer? YES NO Employer’s Contact Number: _____

SECOND:

Employer’s Name: _____

Employer’s Address: _____

Address
City
State

Dates of Employment: From: _____/_____/_____
Month Year
 To: _____/_____/_____
Month Year

Position Title: _____ Salary: Starting \$ _____/hr Ending \$ _____/hr

Duties Performed: _____

Reason for Leaving: _____

Name and Title of Supervisor: _____

May We Contact Employer? YES NO Employer’s Contact Number: _____

Third:

Employer's Name: _____

Employer's Address: _____
Address City State

Dates of Employment: From: _____/_____/_____
Month Year Month Year To: _____/_____/_____

Position Title: _____ Salary: Starting \$ _____/hr Ending \$ _____/hr

Duties Performed: _____

Reason for Leaving: _____

Name and Title of Supervisor: _____

May We Contact Employer? YES NO Employer's Contact Number: _____

Fourth:

Employer's Name: _____

Employer's Address: _____
Address City State

Dates of Employment: From: _____/_____/_____
Month Year Month Year To: _____/_____/_____

Position Title: _____ Salary: Starting \$ _____/hr Ending \$ _____/hr

Duties Performed: _____

Reason for Leaving: _____

Name and Title of Supervisor: _____

May We Contact Employer? YES NO Employer's Contact Number: _____

REFERENCES- Provide at least three professional references thoroughly acquainted with your abilities- no relatives.

Name	Contact Number	Email (if applicable)	Business/Profession
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ADDITIONAL SPACE- For any additional information you wish to provide:

DISCLOSURE AGREEMENT

I hereby certify that the information set forth above in my employment application, resume, and any attachments are true and complete to the best of my knowledge. I authorize the Town of Stockton Springs to investigate all information set forth in my application, by contacting my prior employers and other references set forth above, and by any and all other means authorized or permitted by law, including a criminal background check and motor vehicle driving record check. I understand that if I am hired, omissions or false or misleading statements in this application or interviews will be grounds for immediate termination of my employment.

Signature _____ Date _____