

Town of Stockton Springs *AN EQUAL OPPORTUNITY EMPLOYER*

P.O. Box 339

Stockton Springs, ME 04981

(207) (207) 567-3404

(207) 567-3710 fax

Employment Application

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Telephone: _____ SSN _____

Are you a citizen of the United States or otherwise authorized to work in the United States?
__ Yes __ No Proof of citizenship or immigration status will be required upon employment.

Position applied for: _____ Date of application: _____

Referred by: _____ Date available to work: _____ Salary desired: _____

Have you previously applied for a position with the Town of Stockton Springs? __ Yes __ No

If yes, what position? _____

Give names and addresses of Schools, Major, Degree or Certificate Graduated Yes/No

High School _____

College _____

Graduate or Other Schools _____

Continuing Education _____

Employment History

Give names and addresses of employers beginning with your present or most recent employer. Include any military service assignments. Also include job-related volunteer activities. (You may exclude organizations which would reveal race, color, religion, gender, national origin, age, ancestry, disability, sexual orientation, or other protected status.) Please go back 10 years. You may substitute a resume for this section

Employer's Name: _____

Address: _____

Dates of Employment: Start Date _____ End Date _____

Salary: Starting \$ _____ Final \$ _____

Supervisor's name: _____ Supervisor's phone number: _____

Title and specific duties/responsibilities (Indicate "See Resume" if applicable):

Reason for Leaving: _____

Employer's Name: _____
Address: _____
Dates of Employment: Start Date _____ End Date _____
Salary: Starting \$ _____ Final \$ _____
Supervisor's name: _____ Supervisor's phone number: _____
Title and specific duties/responsibilities (Indicate "See Resume" if applicable): _____
Reason for Leaving: _____

Employer's Name: _____
Address: _____
Dates of Employment: Start Date _____ End Date _____
Salary: Starting \$ _____ Final \$ _____
Supervisor's name: _____ Supervisor's phone number: _____
Title and specific duties/responsibilities (Indicate "See Resume" if applicable): _____
Reason for Leaving: _____

Employer's Name: _____
Address: _____
Dates of Employment: Start Date _____ End Date _____
Salary: Starting \$ _____ Final \$ _____
Supervisor's name: _____ Supervisor's phone number: _____
Title and specific duties/responsibilities (Indicate "See Resume" if applicable): _____
Reason for Leaving: _____

Professional Associations

List any memberships in professional organizations. (You may exclude organizations which would reveal race, color, religion, gender, national origin, age, ancestry, disability, sexual orientation or other protected status.)

Have you ever been convicted of a crime, other than a minor traffic violation? __ Yes __ No

If yes, please explain: _____

An affirmative response will not automatically disqualify you from being considered as a candidate for employment.

Technological Skills

What software can you use? _____

Word Processing: _____

Database: _____

Other: _____

Mechanical Skills:

What equipment/machinery can you operate? _____

Applicant's Statement (this *must* be signed by all applicants prior to employment)

I hereby affirm that the information provided on this application (and accompanying resume and attachments, if any) is true and complete to the best of my knowledge. I also agree that any false or misleading information given in my application or interview, or any omission of requested information, may disqualify me for further consideration for employment and may be considered justification for dismissal if discovered at a later date. I understand the filing of an application does not guarantee employment. I will be expected to meet the established employment standards which will include satisfactory references and the ability to satisfactorily perform the position requirements. I understand and acknowledge that the Employee may resign at any time and the Employer may discharge the Employee at any time in accordance with the Town's Personnel Policy. I authorize the Town of Stockton Springs to conduct a thorough investigation of my past and current employment and/or education listed above. This includes a criminal background check, motor vehicle driving record check and consumer credit check. I release from all liability or responsibility the Town of Stockton Springs or its agents for requesting, and all persons, companies, and corporations for supplying such information. I hereby acknowledge that I have read, understand and accept the above conditions.

Signature _____ Date _____

The Town of Stockton Springs considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, veteran status, sexual orientation, or any other legally protected status.

3/2017