

Town of Boothbay Harbor

11 Howard St.
Boothbay Harbor, ME 04538
207-633-3671

EMPLOYMENT APPLICATION

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

REFERENCES			
<i>Please list three professional references.</i>			
Full Name		Relationship	
Company		Phone ()	
Address			
Full Name		Relationship	
Company		Phone ()	
Address			
Full Name		Relationship	
Company		Phone ()	
Address			
DISCLAIMER AND SIGNATURE			
<p>I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that if I am employed, any false statements on this application may be grounds for dismissal.</p> <p>I authorize investigation of all statements contained in this application. I also grant permission to contact all references listed above, and authorize them to release all information concerning my previous employment and any other pertinent information these references might have, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing this information to you.</p> <p>I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time and without prior notice.</p>			
Signature		Date	

Position(s) Applied For	Date of Application			
How Did You Learn About Us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Employment Agency <input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Inquiry <input type="checkbox"/> Other _____				
APPLICANT INFORMATION				
Last Name	First Name	Middle Name		
Address: Number	Street	City	State	Zip
Telephone Number(s)		E-Mail Address		

Best time to contact you at home is: _____:_____am/pm

If you are under 18 years of age, can you provide required proof of your eligibility to work? [] Yes [] No

Have you ever filed an application with us before? [] Yes [] No
If Yes, give date _____

Have you ever been employed with us before? [] Yes [] No
If Yes, give date _____

Do any of your relatives, other than spouse, work here? [] Yes [] No
If Yes, state name, relationship and location _____

Are you currently employed? [] Yes [] No

May we contact your present employer? [] Yes [] No

Are you legally authorized to work in the U.S.? [] Yes [] No
Proof of citizenship or immigration status will be required upon employment

Have you ever been convicted of a crime? [] Yes [] No
If Yes, explain _____
(a conviction does not necessarily preclude employment)

Date available for work ____/____/____ What is your desired salary range? _____

Are you available to work: [] Full Time
 [] Part Time (Please indicate Mornings Afternoons Evenings)
 [] Temporary (Please indicate dates available ____/____ - ____/____)

EDUCATION									
High School					Address				
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College					Address				
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Other					Address				
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
PREVIOUS EMPLOYMENT									
Company				Phone		()			
Address				Supervisor					
Job Title									
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company					Phone		()		
Address					Supervisor				
Job Title									
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company					Phone		()		
Address					Supervisor				
Job Title									
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company					Phone		()		
Address					Supervisor				
Job Title									
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
MILITARY SERVICE									
Branch					From		To		
Rank at Discharge					Type of Discharge				
If other than honorable, explain									

COMMENTS: Include explanation of any gaps in employment.															
Describe any specialized training, apprenticeship skills and extra-curricular activities.															
Describe any job-related training received in the Untied States military.															
List professional, trade, business or civic activities and offices held.															
You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:															
ADDITIONAL INFORMATION															
Other Qualifications: Summarize special job-related skills and qualifications acquired from employment or other experience.															
SPECIALIZED SKILLS (SKILLS/EQUIPMENT OPERATED)															
<table border="0"> <tr> <td>___ Terminal</td> <td>___ Spreadsheet</td> <td>___ PC/MAC</td> <td>Production/Mobile Machinery (list)</td> <td>Other (list)</td> </tr> <tr> <td>___ Word Processing</td> <td>___ Typewriter</td> <td>___ Shorthand</td> <td>_____</td> <td>_____</td> </tr> <tr> <td></td> <td>WPM ___</td> <td>WPM ___</td> <td>_____</td> <td>_____</td> </tr> </table>	___ Terminal	___ Spreadsheet	___ PC/MAC	Production/Mobile Machinery (list)	Other (list)	___ Word Processing	___ Typewriter	___ Shorthand	_____	_____		WPM ___	WPM ___	_____	_____
___ Terminal	___ Spreadsheet	___ PC/MAC	Production/Mobile Machinery (list)	Other (list)											
___ Word Processing	___ Typewriter	___ Shorthand	_____	_____											
	WPM ___	WPM ___	_____	_____											
State any additional information you feel may be helpful to us in considering your application.															
Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.															
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.															
[] Yes [] No															