



Town of Orrington, Maine Employment Application

The Town of Orrington is an Equal Opportunity Employer. Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, sexual orientation, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

(Please Print)

Date of Application: _____

Position(s) Applied for: _____

Name: _____
Last First Middle

Address: _____
Number Street City State Zip

Telephone: () _____ Social Security Number: _____

Have you filed an application here before? Yes ____ No ____ If yes, give date _____

Have you ever been employed here before? Yes ____ No ____ If yes, give date _____

Are you employed now? Yes ____ No ____

May we contact your present employer? Yes ____ No ____

Are you prevented from lawfully becoming employed
in this country because of Visa or Immigration status? Yes ____ No ____

(proof of citizenship or immigration status
may be required upon employment)

On what date would you be available for work? _____

Are you available to work Full Time Part Time Shift Work Temporary

Are you on a lay-off and subject to recall? Yes ____ No ____

Can you travel if a job requires it? Yes ____ No ____

Have you been convicted of a felony within the last 7 years? Yes ____ No ____

If yes, please explain: _____

Veteran of the U.S. military service? Yes ____ No ____ If yes, Branch _____

Do you have any physical, mental or medical impairment or disability that would limit your job performance for the position for which you are applying? Yes _____ No _____

If yes, please explain: _____

Are there workplace accommodations which would assure better job placement and/or enable you to perform your job to your maximum capability? Yes _____ No _____

If yes, please indicate: _____

List professional, trade, business or civic activities and offices held. (exclude those which indicate race, color, religion, sex, or national origin): _____

Give name, address and telephone number of three references who are not related to you and are not previous employers.

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin.

1.

	Dates Employed		Work Performed
	From	To	
Employer			
Address			
Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			

2.

	Dates Employed		Work Performed
	From	To	
Employer			
Address			
Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			

3.

	Dates Employed		Work Performed
	From	To	
Employer			
Address			
Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			

4.

	Dates Employed		Work Performed
	From	To	
Employer			
Address			
Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience.

Education

	Elementary	High	College/University	Graduate/ Professional
School Name				
Years Completed: (circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study:				
Describe Specialized Training, Apprenticeship, Skills, and Extra- Curricular Activities				

State any additional information you feel may be helpful to us in considering your application. Please feel free to provide a resume and cover letter.

Agreement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant

Date

For Personnel Department Use Only

Arrange Interview Yes No

Remarks _____

Employed Yes No Date of Employment _____ Interviewer _____ Date _____

Job Title _____ Hourly Rate/ _____ Dept. _____
Salary _____

By _____
Name and Title

Date

