APPLICATION
FOR EMPLOYMENT

TOWN OF FORT FAIRFIELD
18 Community Center Dr
Fort Fairfield, ME 04742
(207) 473-0923

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

(PLEASE PRINT)

Position(s) Applied For

Date of Application

How Did You Learn About Us?

☐ Advertisement
☐ Friend
☐ Walk-In

☐ Employment Agency
☐ Relatives
☐ Other

Last Name

First Name

Middle Name

Address

Number

Street

City

State

Zip Code

Telephone Number(s):

Social Security Number

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 __________________________

Are you currently employed?

☐ 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 will 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 currently on "lay-off" status and subject to recall?

☐ Yes  ☐ No

Can you travel if a job requires it?

☐ Yes  ☐ No

Have you been convicted of a felony.

Conviction will not necessarily disqualify an applicant from employment.

☐ Yes  ☐ No

If Yes, please explain __________________________

WE ARE AN EQUAL OPPORTUNITY EMPLOYER
## Education

<table>
<thead>
<tr>
<th>Name and Address of School</th>
<th>Course of Study</th>
<th>Years Completed</th>
<th>Diploma Degree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elementary School</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High School</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Undergraduate College</td>
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<tr>
<td>Graduate Professional</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (Specify)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Indicate any foreign languages you can speak, read and/or write

Describe any job-related training received in the United States military.

## Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.

<table>
<thead>
<tr>
<th>Employer</th>
<th>Dates Employed</th>
<th>Work Performed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>From</td>
<td>To</td>
</tr>
<tr>
<td>Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone Number(s)</td>
<td>Hourly Rate/Salary</td>
<td>Starting</td>
</tr>
<tr>
<td>Employment Details</td>
<td>Dates Employed</td>
<td>Work Performed</td>
</tr>
<tr>
<td>--------------------</td>
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</tr>
<tr>
<td>Employer</td>
<td>From</td>
<td>To</td>
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<tr>
<td>Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone Number(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job Title</td>
<td>Supervisor</td>
<td></td>
</tr>
<tr>
<td>Reason for Leaving</td>
<td></td>
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</tr>
</tbody>
</table>

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

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

<table>
<thead>
<tr>
<th></th>
<th>Check Skills/Equipment Operation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer</td>
<td>Fax</td>
</tr>
<tr>
<td>PC</td>
<td>Lotus 1-2-3</td>
</tr>
<tr>
<td>Calculator</td>
<td>PBX System</td>
</tr>
<tr>
<td>Typewriter</td>
<td>Word Perfect</td>
</tr>
</tbody>
</table>

**Production/Mobile Machinery (list):**

**Other (list):**

State any additional information you feel may be helpful to us in considering your application.

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**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 description of the activities involved in such a job or occupation is attached.  

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### References

1. 
   
   (Name)  
   (Address)  
   Phone #

2. 
   
   (Name)  
   Phone #
   Address

3. 
   
   (Name)  
   Phone #
   (Address)
<table>
<thead>
<tr>
<th>Position(s) Applied For Is Open:</th>
<th>☐ Yes</th>
<th>☐ No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Position(s) Considered For:</td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>

Date: ____________________

NAME: ______________  POSITION: ______________  DATE: __/__/__

NOTES:
Applicant’s Statement

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.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

<table>
<thead>
<tr>
<th>Signature of Applicant</th>
<th>Date</th>
</tr>
</thead>
</table>

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview  ○ Yes  ○ No

Remarks

<table>
<thead>
<tr>
<th>Employed</th>
<th>Yes</th>
<th>No</th>
<th>Interviewer</th>
<th>Date of Employment</th>
</tr>
</thead>
</table>

Job Title

<table>
<thead>
<tr>
<th>Hourly Rate/ Salary</th>
<th>Department</th>
</tr>
</thead>
</table>

By ________________________

NAME AND TITLE DATE

NOTES:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________