

Employment Application

Notice to Applicant

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, or the existence of a medical condition or handicap. Please type or print all information requested. Any application not filled in it's entirety may be rejected or returned for correction. Please attach a copy of your resume and letter of intent along with this application for consideration.

General Application Information

<input type="checkbox"/> Resume Attached <input type="checkbox"/> Letter of Intent Attached <input type="checkbox"/> Additional Documentation			Application Date		
Applicant's Full Name					
Position Applied For		<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary			
When could you start?		Referral Source		<input type="checkbox"/> Job Ad <input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Agency <input type="checkbox"/> Other	
Are you able to perform all essential and nonessential functions of the position for you are applying with or without reasonable accommodation?			<input type="checkbox"/> Yes <input type="checkbox"/> No	Social Security Number	
Do you hold a valid driver's license?		<input type="checkbox"/> Yes <input type="checkbox"/> No	State	License #	Class
Are you a U.S. Citizen?			<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you willing to travel as required by your position?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you completed an application with the Town before? (If yes, when?)		<input type="checkbox"/> Yes _____ <input type="checkbox"/> No		Have you ever been employed by the Town? (If yes, when?)	
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (18+)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you currently laid-off and subject to recall?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, are you prevented from lawfully becoming employed in the United States due to Visa or Immigration Status?		
		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Street Address					
City		State		Zip Code	
Mailing Address (if different)		<input type="checkbox"/> N/A (Same as above)			
City		State		Zip Code	
Contact Number			Type	<input type="checkbox"/> Cell Phone <input type="checkbox"/> Home Phone <input type="checkbox"/> Other	
Email Address					

Have you ever been convicted of a crime? (If yes, please explain on the Page 4 of this application in the space provided)	<input type="checkbox"/> Yes <input type="checkbox"/> No	** Answering "Yes" to this question does not disqualify you from potential employment with the Town. **
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Have you been convicted of any motor vehicle violations other than parking tickets in the last 5-years? (If yes, please explain)	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Are you an active member or veteran of the U.S. Military Service? (If yes, which branch of service, highest rank achieved)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Active <input type="checkbox"/> Reserves <input type="checkbox"/> Retired or Discharged
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Branch of Service		Highest Rank Achieved	
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Can you speak a foreign language? (If yes, which one(s))	<input type="checkbox"/> Yes <input type="checkbox"/> No	
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Please list any professional, trade, business, or civic activities or offices held	<input type="checkbox"/> N/A	
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Special Skills & Qualifications

Please briefly summarize special skills and qualifications acquired from prior employment, training, or other experiences.

Please ensure a complete resume is attached with all previous employment experience.

Employment Experience Background

Employer		From:		To:	
Address		Phone #			
Job Title					
Duties					
Reason for Leaving					
Employer		From:		To:	
Address		Phone #			
Job Title					
Duties					
Reason for Leaving					

Employer		From:		To:	
Address		Phone #			
Job Title					
Duties					
Reason for Leaving					
Employer		From:		To:	
Address		Phone #			
Job Title					
Duties					
Reason for Leaving					
Employer		From:		To:	
Address		Phone #			
Job Title					
Duties					
Reason for Leaving					

Educational Background		
Elementary School		<input type="checkbox"/> Completed
High School		<input type="checkbox"/> Graduated / GED
College/University		<input type="checkbox"/> Some College - Years Completed _____ <input type="checkbox"/> Associate's degree <input type="checkbox"/> Bachelor's Degree
Degree of Study		
Graduate / Professional		<input type="checkbox"/> Some Graduate - Years Completed _____ <input type="checkbox"/> Master's Degree <input type="checkbox"/> Doctorate
Degree of Study		
Specialized Training		
Apprenticeship, etc.		
Honors / Awards Received		

Reference # 1

Name

Email Address

Phone Number

Reference # 2

Name

Email Address

Phone Number

Reference # 3

Name

Email Address

Phone Number

In the event of an emergency who should we contact?

Emergency Contact Name

Street Address

City

State

Zip Code

Phone Number

Email Address

Please provide any additional information you wish to provide or that may have been required as part of this application

Agreement

I hereby certify that answers given 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 to arrive at an employment decision and I waive my rights under the Federal Privacy Act or any other relevant laws for this purpose. I understand that this application is not and is not intended to be a contract of employment. I understand that I may be asked to submit to a physical examination (required of positions in certain departments) the cost of which will be paid for by the Town.

In the event of employment by the Town, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that if I am hired, I will be required to abide by all the applicable rules and regulations pertaining to employees of the Town of Bridgton.

Applicant Name Printed

Applicant Signature

Date