Town of Porter Selectmen's Office 71 Main Street Porter, Maine 04068

Phone: 207-625-8344 Fax: 207-625-4120 Web: www.portermaine.org



### **EMPLOYMENT APPLICATION**

#### WE ARE AN EQUAL OPPORTINITY EMPLOYER

Position Desired:			Date:		
Last Name		First Name	Middle Name		
Address: <u>Number</u>	<u>Street</u>	<u>City/Town</u>	<u>State</u>	Zip Code	
Telephone #: <u>Home</u>	: <u>Cell/Work</u>		Email Address		

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

Proof of ctizenship or immigration status will be required upon employment.

Have you been convicted of a crime, other than a minor traffic violation? Yes No	Have you been	convicted of a crime,	other than a	a minor traffic violation?	Yes	No
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If yes, please explain. An affirmative answer will not automatically disqualify you from being considered as a candidate for employment.

# **Employment Experience:**

Employer		Dates Employed ( from – to )	Work Performed
Address			
Job Title	Supervisor	Hourly rate/Salary	
Phone Number (s)			
Reason for leaving			
Employer		Dates Employed ( from – to )	Work Performed
Address			
Job Title	Supervisor	Hourly rate/Salary	
Phone Number (s)			
Reason for leaving			
Employer		Dates Employed ( from – to )	Work Performed
Address			
Job Title	Supervisor	Hourly rate/Salary	
Phone Number (s)			
Reason for leaving			

### List professional, trade, business, or civic activities and offices held.

You may exclude membership which would reveal race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(If you need addition space, please continue on a separate sheet of paper.)

### **Education:**

	Name and address of school	Course or major	Graduated	Diploma/Degree
High School				
Undergraduate College				
Graduate College				
Other (specify)				

Describe any specialized training, apprenticeship, skills and extracurricular activities which would prepare you for this position.

## Office Equipment and Computer Programs:

## **References:**

Name and Address	Phone #

I hereby affirm that the information provided on this application 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 at a later date.

I understand the filing of an application does not guarantee employment. I will be expected to meet the established standards which will include satisfactory references, the ability to perform the position requirements and the satisfactory performance thereof.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I release from all liability or responsibility the Town of Porter 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: \_\_\_\_\_