

TOWN OF BRIDGTON, MAINE  
3 CHASE STREET, SUITE 1  
BRIDGTON, MAINE 04009  
207-647-8786

APPLICATION FOR EMPLOYMENT

NOTE: Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status or the existence of a medical condition or handicap. Please type or print all information requested. An application not properly filled out may be rejected or returned for correction. A resume may be attached to this Application.

Date of Application \_\_\_\_\_

Position(s) Applied For \_\_\_\_\_

Referral Source: Advertisement \_\_\_\_\_ Friend \_\_\_\_\_ Relative \_\_\_\_\_ Agency \_\_\_\_\_ Other \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Current Address \_\_\_\_\_  
Number Street POB City/Town State Zip

Telephone ( ) \_\_\_\_\_ Social Security # \_\_\_\_\_

If the above is a temporary address, please list your permanent address and telephone number

Have you filed an Application with this Town before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give date(s) \_\_\_\_\_

Have you ever been employed here before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, give date(s) \_\_\_\_\_

If employed and you are under the age of 18, can you furnish a valid work permit?

Are you employed now? Yes \_\_\_\_\_ No \_\_\_\_\_ May we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

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

Are you a citizen of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_ If Naturalized, give date and place of Naturalization

Are you prevented from lawfully becoming employed in the United States because of Visa or Immigration Status? Yes \_\_\_\_\_ No \_\_\_\_\_ (Proof of citizenship or immigration status will be required upon employment)

Are you available to work Full Time \_\_\_\_\_ Part-time \_\_\_\_\_ Shift \_\_\_\_\_ Temporary \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_

Can you type? Yes \_\_\_\_\_ No \_\_\_\_\_ Can you operate a computer? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you willing to travel if the job requires it? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have a valid Maine Driver's License? Yes \_\_\_\_\_ No \_\_\_\_\_

License # \_\_\_\_\_ Class \_\_\_\_\_

Have you been convicted of any motor vehicle violations other than parking tickets in the last five years?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, provide details \_\_\_\_\_

Have you ever been convicted of a crime? If yes, provide details \_\_\_\_\_

Name, Address and Telephone Number of person to be notified in case of an emergency \_\_\_\_\_

Can you perform the essential and nonessential functions of the position for which you are applying with or without reasonable accommodation? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you speak a foreign language? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which one(s)?

List any professional, trade, business or civic activities and offices held \_\_\_\_\_

List name, address and telephone number of three (3) personal references who are not related to you and who are not former employers.

Are you a veteran of the U.S. Military Service? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list Branch of Service, highest rank attained, and type of discharge \_\_\_\_\_

### EMPLOYMENT EXPERIENCE

Starting with your present or most recent job, list your employment experience. Include military service time and volunteer activities.

1. EMPLOYER \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

ADDRESS & TELEPHONE NUMBER \_\_\_\_\_

JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

DUTIES \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_

2. EMPLOYER \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
ADDRESS & TELEPHONE NUMBER \_\_\_\_\_  
JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_  
DUTIES \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

3. EMPLOYER \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
ADDRESS & TELEPHONE NUMBER \_\_\_\_\_  
JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_  
DUTIES \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

4. EMPLOYER \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
ADDRESS & TELEPHONE NUMBER \_\_\_\_\_  
JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_  
DUTIES \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

5. EMPLOYER \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
ADDRESS & TELEPHONE NUMBER \_\_\_\_\_  
JOB TITLE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_  
DUTIES \_\_\_\_\_  
REASON FOR LEAVING \_\_\_\_\_

SPECIAL SKILLS & QUALIFICATIONS

Summarize special skills and qualifications acquired from prior employment, training or other experiences  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

