



# Town of Baldwin

## Job Application

534 Pequawket Trail, West Baldwin, Maine 04091  
625-3581 ~ 625-7780 Fax

### Name and Address

Name (First, MI, Last)

Social Security Number:

Mailing Address:

City, State, and Zip Code:

Telephone:

Alternate Phone:

If under 18, please list age:

Email:

### Job Type

Days/hours available to work

I have no

Preference

Monday

Tuesday

Wed.

Thurs.

Friday

Saturday

Sunday

I am seeking a:

Full-time job

Part-time job

Full or Part-time

How many hours can you work weekly?

Can you work nights?

Date available to begin?

### Additional Information

Have you ever been employed by this organization in the past?  Yes  No

I certify that I am a U.S. citizen, permanent resident, or a foreign national with authorization to work in the United States.  Yes  No

Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld Judgement to a felony?  Yes  No

If yes, please explain:

Do you have a Maine valid driver's license?:? Yes  No  Drivers Lic Number:

Have you had ANY accidents during the past three years?

How many?

Have you had ANY moving violations during the past three years?

How many?

## Education

High School	Location (mailing address)	Yrs Completed	Major	Degree or Diploma

## College or Business/Trade School


## Military

<b>Have you ever been in the Armed Forces:</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<b>Date entered:</b>
<b>Are you now a member of the National Guard?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<b>Discharge date:</b>

**Specialty:**

## Work Experience

*Please list All work experience beginning with your most recent job held. Attach additional sheets if necessary.*

<b>Company:</b>	<b>Name of Last Supervisor:</b>	<b>Hrs/week:</b>
<b>Address:</b>	<b>Start Date:</b>	<b>Starting Salary</b>
<b>City, State, and Zip Code</b>	<b>End Date:</b>	<b>Final Salary:</b>
<b>Phone number:</b>	<b>Your last job title:</b>	

**Reason for leaving (be specific)**

**List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.**

**May we contact this employer? Yes ( ) No ( )**

<b>Company:</b>	<b>Name of Last Supervisor:</b>	<b>Hrs/week:</b>
<b>Address:</b>	<b>Start Date:</b>	<b>Starting Salary</b>
<b>City, State, and Zip Code</b>	<b>End Date:</b>	<b>Final Salary:</b>
<b>Phone number:</b>	<b>Your last job title:</b>	

**Reason for leaving (be specific)**

**List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.**

May we contact this employer? Yes ( ) No ( )

**Work Experience (continued)**

<b>Company:</b>	<b>Name of Last Supervisor:</b>	<b>Hrs/week:</b>
<b>Address:</b>	<b>Start Date:</b>	<b>Starting Salary</b>
<b>City, State, and Zip Code</b>	<b>End Date:</b>	<b>Final Salary:</b>
<b>Phone number:</b>	<b>Your last job title:</b>	

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact this employer? Yes ( ) No ( )

**References**

*Please include name, phone number, and circumstances of your acquaintance. Exclude relatives and former employers.*

- 1.
- 2.
- 3.
- 4.

*I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that, should this application contain any false or misleading information, my application may be rejected or my employment with this company terminated.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_