

Application For Employment

Town of Brunswick, Maine
85 Union Street, Brunswick, Maine 04011

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

(PLEASE PRINT)

Last Name	First Name	Middle Name
Address Street	City	State Zip code
Telephone Number (Home)	Telephone Number (Cell)	

Position(s) Applied For
How did you learn about us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other _____

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

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 current employer? Yes No
Refusal to permit contact of present employer may be cause for rejection of application.

Are you eligible to be lawfully employed in this country? Yes No
Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Temporary

Can you travel if a job requires it? Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Name of School	Address of School	Course of Study	Diploma/Degree # Credit Hours
High School				
College				
College				
Other				

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

	Fluent	Good	Fair
Speak			
Read			
Write			

Additional Information

Other Qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills

Municipal	Microsoft Office	Other Software Applications (list):	Production/Mobile Machinery (list):	Other (list):
Munis	Access	_____	_____	_____
Vision	Excel	_____	_____	_____
TRIO	Word	_____	_____	_____
RecTrac	PowerPoint	_____	_____	_____
	Project	_____	_____	_____
	Publisher	_____	_____	_____

Note to Applicants: DO NOT ANSWER THESE QUESTIONS UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Do you have the full physical, mental, emotional, and medical ability to do the job for which you have applied?
If not, please explain.

If you need a reasonable accommodation to do the job for which you have applied, please explain.

Can you perform the duties of the job for which you have applied with or without accommodation?

Yes No

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, sex, ancestry, national origin, physical or mental handicaps, or other protected status.

1.	Employer		Date Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				
2.	Employer		Date Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				
3.	Employer		Date Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				
4.	Employer		Date Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				

Business References

- 1 _____
- 2 _____
- 3 _____

U.S. Military or Naval Service	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Present Membership in National Guard or Reserves	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Activities: (Civic, Athletic, etc.) _____					

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.

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.

This application for employment does not constitute a contract of employment between applicant and the Town of Brunswick.

Signature of Applicant

Date

FOR H.R. DEPARTMENT USE ONLY

Tracking No:

Department

Administration	Assessing	Codes	Planning	Finance
Tax	Clerks	Police	Fire	
Human Services	Public Works	Parks & Recreation		

Affirmative Action EEO Category

1. Officials and Managers	Notes:
2. Professionals	
3. Technicians	
4. Sales Workers	
5. Office Clerical Workers	
6. Craftworkers	
7. Operatives	
8. Laborers	
9. Service Workers	