

# Employment Application

Town of Madison

PO Box 190  
Madison, ME 04950

Position applying for: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_ Alternate telephone: \_\_\_\_\_

Address: \_\_\_\_\_

**Are you able to perform the essential duties of the position with or without accommodations?**

Yes  No

**If necessary for the job, are you older than:**

14  16  17 (Check One)  
 18  21

**Are you legally eligible for employment in the U.S.?**

Yes  No

**I am seeking a permanent position:**

Yes  No

**I will be able to report to work \_\_\_\_\_ days after being notified I am hired.**

**If necessary for the job, I am able to:**

Work Overtime?  Yes  No  
Provide a valid Maine Driver's License?  Yes  No

**If so, fill out the following:**

Issuing State: \_\_\_\_\_ Type: \_\_\_\_\_

**Endorsement(s):**

Hazardous Materials  Passengers  
 Tankers  Tank with Hazardous Materials  
 School Buss  Double/Triple Trailers

**Work the following shifts: (Check all that apply)**

Any  Day  Night  Swing  Rotating  
 Split  Overnight  Other \_\_\_\_\_

## EMPLOYMENT

List most recent employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary following this section or on an extra sheet of paper if necessary.

Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
		Supervisor: Telephone:	
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
		Supervisor: Telephone:	
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
		Supervisor: Telephone:	

**Summarize other employment related to this job:**

**EDUCATION**

	Institution Name	Years Completed	Field of Study	Graduate or Degree Program
High School				
College/University				
Business/Technical				
Additional				

**MILITARY**

Are you a veteran?  Yes  No

Please provide any duty/specialized training:

**SKILLS & QUALIFICATIONS**

Other qualifications such as special skills, abilities or honors that should be considered:

Types of computers, software, and other equipment you are qualified to operate or repair:

Professional licenses, certifications or registrations:

Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention:

**REFERENCES**

List three references who are not relatives and who can attest to your work.

Name	Address	Telephone
Name	Address	Telephone
Name	Address	Telephone

**INFORMATION TO THE APPLICANT**

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test. I understand and agree to the information shown above.

Signature of Applicant

Date

**Equal Employment Opportunity:** While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no effect on your application for employment.

**Background Investigation Authorization Form**

I, \_\_\_\_\_, understand and agree that, as a condition of employment, and in order to assess my qualifications for the position of \_\_\_\_\_, a full investigation of my background is necessary, including verification of all information submitted on my application for employment.

**I have read, understand and agree to the following:**

I hereby authorize the Town Of Madison H/R Department, or a third party acting on its behalf, to conduct a thorough inquiry into all areas deemed necessary to assess my qualifications for employment. I understand and agree that the Town of Madison H/R Department may contact or contract with private information centers, consumer reporting agencies, government agencies, mutual association, educational institutions, former employers and other third parties to assess my qualifications and verify information that I provide is accurate in every way. This may include, but is not limited to: verification of my employment, educational, and personal history; verification of information provided on my application or resume; contact with current and former employers, clients, business associates', professional organization or other institutions regarding work performance and character; inquiry into my credit history, driving record and criminal history as well as all public record information relating to my application for employment.

I hereby specifically release from liability and authorize employers, local, state, and federal administrators, credit bureaus, institutions, mutual associates, consumer reporting agencies or any persons to freely and completely respond to any inquiry made by or on behalf of the Town of Madison, H/R Department.

**A copy of this document shall be, for all intents and purposes, as valid as the original**

Applicant Legal Name: \_\_\_\_\_  
Last First MI

Other Names Used: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Driver's License No: \_\_\_\_\_ State of License \_\_\_\_\_

\_\_\_\_\_  
Legal Address City, State, Zip

**I hereby authorize the background investigation discussed herein and I affirm that all answers given to the Town of Madison are true and complete. I understand that my employment may be ended at any time if it's discovered that I withheld or falsified any information during the hiring process.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

