



**APPLICATION FOR EMPLOYMENT
TOWN OF LINCOLN
63 MAIN STREET
LINCOLN, MAINE 04457**

www.lincolmaine.org

We are pleased that you are considering a position with the Town of Lincoln. Public service can be extremely rewarding and challenging. Please return the completed form to the above address. The Town of Lincoln is an Equal Opportunity Employer and will not discriminate in any of its practices on the basis of race, color, religion, sex, marital status, physical or mental disability, age, ancestry, national origin, or veteran status unless based upon a bona fide occupational qualification. If you need additional space, complete this form, attach a separate sheet of paper and mail.

Position(s) Applied For				Date of Application	
Last Name		First Name		Middle Initial	
Address	<i>Number</i>	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
Telephone Number(s)				e-mail address	

Were you ever employed by the Town of Lincoln? If yes, when/what dept/

Can you perform the essential job functions of the job for which you are applying? If no, then list reasonable accommodations required for you to perform the job:

Are you currently employed? If yes, may we contact your present employer?

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment.)

Do you possess a valid Maine Driver's License?
If yes, what endorsements do you have:

On what date would you be available for work?

Have you ever been convicted of a felony?
Conviction will not necessarily disqualify an applicant from employment. If yes, please explain on a separate sheet of paper.

Were you in the U.S. Armed Forces? If so, which branch:
Do you possess an honorable discharge?

If required, are you available for weekend work?

Below, check those areas that match those skills and abilities that you possess.

- | | | | | | |
|----------------------------------|---------------|----------------|-------------------|-----------------|---------|
| Writing | Windows | Microsoft Word | Microsoft Excel | Mechanic skills | Cashier |
| 100 hour Criminal Justice Course | Firefighter I | Firefighter II | Loader | Backhoe | |
| Grader | Bulldozer | Carpentry | EMT (B or I or P) | Other: | |

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, gender, national origin, disabilities or other protected status.

Company Name, Address, & Supervisor	Description of duties	Employment	Salary	Reason for leaving
Name:		Start		
Address:				
Supervisor:		End		
Name:		Start		
Address:				
Supervisor:		End		
Name:		Start		
Address:				
Supervisor:		End		

Education

	Name of School	Course of Study	Years Completed	Did you graduate?
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No
Undergraduate College				<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate Professional				<input type="checkbox"/> Yes <input type="checkbox"/> No
Other				<input type="checkbox"/> Yes <input type="checkbox"/> No

References (Not former employers or relatives)

Name and Occupation	Address	Phone Number
1.		
2.		
3.		

This application for employment shall be considered active for a period of time not to exceed 30 days. 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 probationary employment as may be necessary in arriving at an employment decision, including, but not limited to character, reputation, background check, ability and credit record. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. In the event of employment, I understand that false or misleading information, or omissions, 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.

Signature _____ Date _____