



EMPLOYMENT APPLICATION

Town of Topsham
100 Main Street
Topsham, Maine 04086
Phone: 207-725-5821
Fax: 207-725-1731

A. Personal information: Information provided in this section is used for identification purposes only.

1. Name: _____
Last Middle First

2. Address: _____
Number Street

City State Zip

3. Contact Numbers:

Home: _____ Cell: _____ E-Mail: _____

4. Nickname(s), maiden name or other names by which you have been known:

5. Are you a U.S. Citizen? _____ Yes _____ No

6. Drivers License Number: _____ Exp. Date: _____ State of issue: _____

7. Are you 18 years or older? _____ Yes _____ No

8. Position applying for: _____

9. Date available to start: _____

10. Salary Range Desired: _____

11. Are you available for work _____ Full-time _____ Part-time.

12. Are you willing to work overtime as needed? _____ Yes _____ No

13. Are you employed now? _____ Yes _____ No

14. Have you ever applied for a job with the Town before? _____

15. Referred by: _____

B. Special Qualifications & Skills

1. List any special qualifications and skills you have.

C. Work History:

Beginning with your present or most recent job, list employment held for the past ten years, including part-time, temporary or seasonal employment, include all periods of unemployment. Attach extra pages if necessary. Please indicate if you feel your present job would be in jeopardy if inquiries are made.

1. From _____ To _____ Employer _____

Address: _____

Phone number: _____ Job Title _____

Duties: _____

Supervisor: _____

Reason for leaving or wanting to leave: _____

2. From _____ To _____ Employer _____

Address: _____

Phone number: _____ Job Title _____

Duties: _____

Supervisor: _____

Reason for leaving or wanting to leave: _____

3. From _____ To _____ Employer _____

Address: _____

Phone number: _____ Job Title _____

Duties: _____

Supervisor: _____

Reason for leaving or wanting to leave: _____

D. Employment Limitations:

Can you perform the functions of the job with or without reasonable accommodations?

_____ Yes _____ No

E. Educational History:

High School Attended	City/State	Dates Attended From/To	Graduated Yes/No
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College or University Attended: _____

City & State: _____

Dates Attended: _____

Major/Minor: _____

Degree Received & Date: _____

2. List other schools attended: (trade, vocational, business, ect.)

Other: _____

City & State: _____

Dates Attended: _____

Major/Minor: _____

Degree Received & Date: _____

F. References:

Please list three people who are not former employers or family and whom you have known for a least one year.

Name	Address	Telephone	Years Known
_____	_____	Home: _____	_____
_____	_____	Work: _____	_____

Name	Address	Telephone	Years Known
_____	_____	Home: _____	_____
_____	_____	Work: _____	_____

Name	Address	Telephone	Years Known
_____	_____	Home: _____	_____
_____	_____	Work: _____	_____

Background:

Have you ever been disciplined, discharged, and asked to resign from a prior position _____ Yes _____ No

Have you ever resigned from a prior position after a complaint had been received against you or your conduct was under investigation or review? _____ Yes _____ No

Has your contract in a prior position ever been non-renewed? _____ Yes _____ No

Have you ever been charged with or investigated for sexual abuse or harassment of another person? _____ Yes _____ No

Have you ever been convicted of a crime (other than a minor traffic offense)? _____ Yes _____ No

Have you ever entered a plea of guilty or "nolo contendere" (no contest) to any crime (other than a minor traffic offense)? _____ Yes _____ No

Has any court ever deferred, filed or dismissed proceedings without a finding of guilty and required that you pay a fine, penalty or court costs and /or imposed a requirement as to your behavior or conduct for a period of time in connection with any crime (other than a minor traffic offense)? ____ Yes ____ No

If you answered yes to any of the previous questions, provide full details below including, with respect to court actions, the date, offense in question, and the address of the court involved. Attach additional sheets if necessary. Conviction or disposition of a crime is not an automatic bar to employment.

My signature below constitutes authorization to check my employment history, including without limitation, criminal arrest and conviction record checks, reference checks, and release of investigatory information possessed by any state, local or federal agency. I further authorized those persons, agencies or entities that the Town of Topsham contacts in connection with my employment application to fully provide the Town of Topsham any information on the matters set forth above. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation, defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the Town of Topsham, its agents and officials or against any provider of such information.

I understand that information submitted in and with this application may be disclosed to a screening and/or interviewing committee, which may include board members, administrators, and other staff, and members of the community. I give my consent to this disclosure.

Please note: Employment cannot be finalized until the applicant has completed requirements for complete background checks .

Signature _____

Date _____

THE TOWN OF TOPSHAM IS AN EQUAL OPPORTUNITY EMPLOYER

All application materials become the property of the Town of Topsham. None will be returned. Providing any false or misleading information on this application or in the application or employment screening process shall be fully sufficient grounds to refuse to employ the applicant or, if the applicant has been employed, to immediately dismiss the applicant/employee.