



Town of Paris Maine

APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

Date of Application: _____

Position(s) Applied for: _____

Referral Source: Advertisement Friend Relative Walk-In
 Employment Agency Other _____

Name: _____
Last First Middle

Address: _____
Number Street City State Zip

Date of Birth: _____

Social Security Number _____ - _____ - _____

Telephone: _____

Are you a U.S. citizen? Yes No If naturalized, state date & place _____

E-mail Address: _____

Spouse's Name: _____ Number of dependents at home: _____

Are you over the age of 18? Yes No

Have you filed an application here before? Yes No If yes, give date _____

Have you ever been employed here before? Yes No If yes, give date _____

Are you employed now? Yes No May we contact present employer? Yes No

Do you possess a valid driver's license? Yes No If yes, what class? _____

Are you available to work Full-Time Part-Time Shift Work Temporary?

Are you on a lay-off and subject to recall? Yes No

On what date would you be available for work? _____

Have you been charged with or convicted of a crime within the last 7 years? ___ Yes ___ No
If yes, please explain _____

Name and address of person to be notified in case of emergency _____

Veteran of the U.S. Military service? ___ Yes ___ No If yes, Branch _____

Are you able to perform the duties of this job with or without a reasonable accommodation?
_____ Yes _____ No

If you need an accommodation, please explain: _____

Are there workplace accommodations which would assure better job placement and/or enable you to perform your job to your maximum capability? _____ Yes _____ No

If yes, please indicate: _____

Indicate what foreign languages you speak, read, and/or write.

	FLUENTLY	GOOD	FAIR
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held (exclude those which indicate race, color, religion, sex or national origin): _____

Give name, address and telephone number of three references who are not related to you.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organizations names which indicate race, color, religion, sex or national origin.

Employer: _____

Job Title: _____ Supervisor: _____

Dates Employed: From: _____ To: _____

Hourly Rate/Salary: Starting: _____ Final: _____

Work Performed: _____

Reason for Leaving: _____

Employer: _____

Job Title: _____ Supervisor: _____

Dates Employed: From: _____ To: _____

Hourly Rate/Salary: Starting: _____ Final: _____

Work Performed: _____

Reason for Leaving: _____

Employer: _____

Job Title: _____ Supervisor: _____

Dates Employed: From: _____ To: _____

Hourly Rate/Salary: Starting: _____ Final: _____

Work Performed: _____

Reason for Leaving: _____

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience:

EDUCATION

High School: _____ Graduated: _____ Yes _____ NO

College/University: _____ Graduated: _____ Yes _____ NO

Graduate/Professional: _____ Graduated: _____ Yes _____ NO

Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities:

Honors Received: _____

State any additional information you feel may be helpful to us in considering your application.

AN EQUAL OPPORTUNITY EMPLOYER

Agreement

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.

Signature of Applicant

Date

For Personnel Department Use Only

Arrange Interview _____ Yes _____ No

Interviewer

Date

Employed _____ Yes _____ No

Date of Employment _____

Job Title _____ Hourly Rate/Salary _____

By _____
Name and Title

Date

Town of Paris

Notification and Authorization to Release Criminal Information for Employment Purposes

Notification

The position for which I am being considered requires me to consent to a criminal background check as a condition of employment. This check includes the following: Criminal history reference searches for felony and misdemeanor convictions at the county and federal levels of every jurisdiction where I currently reside or where I have resided during the past 7 years; and sex offender registry searches at the county and federal levels in every jurisdiction where I currently reside or where I have resided.

Authorization

I hereby authorize the **Town of Paris** to conduct the criminal background check described above. In connection with this, I also authorize the use of law enforcement agencies and/or private background check organizations to assist the **Town of Paris** in collecting this information. Validity Screening Solutions has been secured as a third party vendor (consumer reporting agency) to assist the **Town of Paris** in collecting and verifying information.

I also am aware that records of arrests on pending charges and/or convictions are not an absolute bar to employment. Such information will be used to determine whether the results of the background check reasonably bear on my trustworthiness or my ability to perform the duties of my position in a manner which is safe for the **Town of Paris** students, employees, and other University community members.

Position(s) Applied for: _____

Town of Paris Department: _____

Please print (for identification purposes):

Full Legal Name: _____
 First Middle Last

Other Names You Have Used in Past Seven Years: _____

Current Address: _____

Previous Address (most recent): _____

Addresses in the 7 years prior to completing this authorization: _____

Phone Number: _____

Alternate Phone Number: _____

Date of Birth: _____
Month/Day/Year

Gender: Female _____ Male _____

Social Security Number: _____

Driver's License # _____

State of Driver's License _____

Have you ever been convicted of a criminal *offense or have any pending criminal* charges against you?

*This refers only to felonies and misdemeanors; you do not need to include non-criminal traffic violations or municipal ordinance violations.

Yes _____ (provide detail on next page) No _____

To the best of my knowledge, the information provided in this Notice and Authorization and any attachments thereto is true and complete. I understand that any falsification or omission of information may disqualify me for this position and/or may serve as grounds for the severance of my employment with the **Town of Paris**. By signing below I hereby provide my authorization to the **Town of Paris** to conduct a criminal background check and I acknowledge that I have been provided with a summary of my rights under the Fair Credit Reporting Act which is attached. In addition to those rights, I understand that I have a right to appeal an adverse employment decision made by the **Town of Paris** based on my background check information within three business days of receipt of such notice and that a determination on my appeal will be made in seven working days from the **Town of Paris** receipt of such appeal.

Signature

Date