



City of Ellsworth
1 City Hall Plaza
Ellsworth, ME 04605
Phone (207) 667-2563 ♦ Fax (207) 667-4908 ♦ www.ellsworthmaine.gov

Employment Application
We are an equal opportunity Employer

Date _____

Job Title/Position Opening you are applying for: _____

Last Name _____ First Name _____

Address _____ Phone _____

Address _____ Email _____

All applicants who are offered employment must provide documentation to establish their identity and employment eligibility for authorization to work in the U.S and must undergo a thorough background check.

Do you have the legal right to work in the U.S? _____

Date of Birth (if less than 18 years old): _____

Driver's License No. & State: _____ Class: _____ Expiration Date: _____

Have you ever been employed by or done any volunteer work for the City of Ellsworth?

Do you have any relatives employed with the City of Ellsworth?
(If yes, please list name(s):

Please list all traffic convictions or accidents in the past 3 years:

Please list other names you have used in the past:

Have you ever been convicted of a crime? If yes, please give explanation.

Education

Did you receive a High School Diploma or GED equivalent? _____

Name of High School and location: _____

Name of School, College, Or University	Major	Credit Hours	Degree*

*Proof of degrees from College/University will be required.

Name of Trade, Technical, Business, Other School	Course of Study	Diploma

List other licenses held, date & license number; professional registrations & dates; certificates & professional memberships: _____

List Honors, Awards, Fellowships: _____

Skills Overview

List computer software with which you are familiar: _____

List languages, other than English, that you speak fluently, read and/or write: _____

Summarize relevant skills & experience that exemplify your qualifications for the above position:

List tools & equipment you can operate: _____

Summarize Volunteer Services work you have done, including dates: _____

Summarize Leadership Roles you have experienced: _____

Employment History

Current or most recent employer: _____

Address: _____ **Phone:** _____

Your Title: _____ **Dates of Employment – From:** _____ **To:** _____

Supervisor’s Name/Title: _____

Salary – Starting: _____ **Ending:** _____ **Hrs. per Week:** _____

Work/Tasks Performed: _____

Reason for Leaving: _____

Next most recent employer: _____

Address: _____ **Phone:** _____

Your Title: _____ **Dates of Employment – From:** _____ **To:** _____

Supervisor’s Name/Title: _____

Salary – Starting: _____ **Ending:** _____ **Hrs. per Week:** _____

Work/Tasks Performed: _____

Reason for Leaving: _____

Next most recent employer: _____

Address: _____ **Phone:** _____

Your Title: _____ **Dates of Employment – From:** _____ **To:** _____

Supervisor’s Name/Title: _____

Salary – Starting: _____ **Ending:** _____ **Hrs. per Week:** _____

Work/Tasks Performed: _____

Reason for Leaving: _____

City of Ellsworth
AUTHORIZATION FOR RELEASE OF INFORMATION

I, (print name) _____ hereby authorize an employee of the City of Ellsworth or other authorized representative bearing this release (or facsimile or copy) to, within one year of its date, obtain information from past and/or current employers listed on the Employment Application as submitted by me on (date) _____.

Employer's Name: _____
Contact Person: _____
Employer's Address: _____

I have filed an application for employment with the City of Ellsworth, Maine. Information regarding my employment with your organization is as follows:

Dates of employment: From _____ To _____
Position: _____

I hereby empower an employee of the City of Ellsworth or other authorized representatives bearing this release (or facsimile or copy) to, within one year of its date, obtain information and records pertaining to me from any or all of the following sources:

- 1. Municipal, State or Federal law enforcement agencies.
- 2. Selective Service System.
- 3. Any banking institution.
- 4. Any place of business (for purposes of obtaining credit or employment data).
- 5. Credit rating bureaus or institutions maintaining individual credit rating files.
- 6. Any previous employer.
- 7. Present employer.
- 8. Any school, college, university or other educational institution.
- 9. Other: _____

I hereby release any Municipal, State, or Federal law enforcement agency, individual or institution, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply with it.

Exceptions to this blanket authorization are: _____

NAME _____ Address _____

SIGNATURE _____ Date _____

Witness: _____ Title: _____

Any information furnished relative to the application of the above individual will be treated with strictest confidence. An applicant typically will not be eliminated or selected on the basis of a single reference. Please complete the employment reference section attached.

City of Ellsworth, 1 City Hall Plaza, Ellsworth, ME 04605
BACKGROUND CHECK AUTHORIZATION

I, (print name) _____ have filed an application for employment with the City of Ellsworth, Maine for the position of _____ and understand that in order to assess my qualifications a full background investigation is necessary. Certain positions may also be conditioned on the successful completion of agility tests, skill evaluations, additional investigations and/or the ability to be bonded. I therefore authorize the City of Ellsworth to conduct an investigation which may include but not be limited to:

- Verification of all information provided by me to the City during the application process.
- Contacting employers (past and present), clients, business associates, professional organizations, or other institutions, regarding work performance and character.
- Verification of licensure and/or educational attainment.
- Military Service Records.
- Complete Criminal Background Check. (Including State & Federal Law Enforcement Agencies)
- Credit check.
- Driver's license check.
- Other: _____

I certify that all the information and materials I have provided to the City of Ellsworth as part of the employment process are accurate and truthful. I realize that providing the City with false information or intentionally withholding relevant information regarding my application may be grounds for rejection or dismissal. If employed, I agree to provide proof of identity, relevant licensure or credentials, and authorization for employment in the United States. Upon employment, I agree to abide by all municipal policies, regulations, ordinances and established work safety practices.

I hereby agree to hold harmless and to release the City of Ellsworth, including its officers and employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization to conduct a thorough background investigation.

PRINT NAME

Current Address

Email Contact Information: _____

Telephone Contact Information: _____

Home

Cell

Previous Addresses or Cities lived in within past 10 years

Social Security #

Date of Birth

Drivers License #

SIGNATURE

Date