Sagadahoc County
State of Maine

Application for Employment

Please forward all Applications to:	Sagadahoc County Administration Attn: Pam Hile, County Administrator 752 High Street Bath, ME 04530
For Additional Information:	Phone: 207-443-8202 Fax: 207 443-8213 E-mail: administrator@sagcounty.com

Instructions to Applicants:
(1) Type or print clearly in Ink.
(2) Answer each question clearly and completely.
(3) All statements made are subject to investigation and verification.
(4) If more space is required, use separate sheet(s) of paper.
(5) Please enclose a cover with this completed application.

POSITION APPLICANT IS SEEKING: _____

PERSONAL DATA

Name: _____
Last (Please Print) First MI

Address: _____
No. Street City State Zip

Telephone:_____
Home Work Cell

Email: _____ Preferred method of contact: _____

How did you hear about this opening: ___ Newspaper ___ MMA Job bank ___ JobsinME

___ Friend/relative ___ Other (list)_____

Have you ever been employed by Sagadahoc County? ___Yes ___No

If yes, give the department and dates: _____ from _____ to _____

Name and relationship of any present County employee related to you:_____

Are you now employed?: ___Yes ___No May we contact your present employer? ___Yes ___No

What date would you be available to start?_____ Do you hold a valid driver's license? ___Yes ___No

Sagadahoc County is an equal opportunity employer

EDUCATION AND TRAINING

HIGH SCHOOL

Name of High School Address

Curriculum Did you graduate? If no, circle highest grade completed: 9 10 11 12

ADDITIONAL EDUCATION: COLLEGE/UNIVERSITY, BUSINESS or SPECIALIZED/TRADE SCHOOL

Name of Institution Address

Years completed Course of Study Degree/Certificate

OTHER TRAINING

Name of Institution Address

Years completed Course of Study Degree/Certificate

List any additional skills, certifications, or licenses you possess that you believe are relevant to the position.

WORK EXPERIENCE

List the positions which you have held. Please list ALL employment in reverse chronological order (most recent position first). Include any periods served in the military and explain any periods of unemployment. Under "Description of Duties" list type of work and responsibilities. If position was supervisory, include number of employees supervised and their general duties. Use additional sheets if needed.

CURRENT or MOST RECENT EMPLOYMENT

Employer Position

Address Telephone Supervisor

Dates Employed: From To Hours Worked Per Week

Reason for Leaving May we contact this employer?

Job duties

PRIOR EMPLOYMENT

Employer Position

Address Telephone Supervisor

Dates Employed: From To Hours Worked Per Week

Reason for Leaving

Job duties

PRIOR EMPLOYMENT

Employer Position

Address Telephone Supervisor

Dates Employed: From To Hours Worked Per Week

Reason for Leaving May we contact this employer?

Job duties

REFERENCES

Please list at least three (3) professional references that we may contact. Use additional sheets if needed.

Name Company

Contact Information

Position the Reference Held Position you held

Please identify period of time that this reference observed your work performance

References (continued)

Name Company

Contact Information

Position the Reference Held Position you held

Please identify period of time that this reference observed your work performance

Name Company

Contact Information

Position the Reference Held Position you held

Please identify period of time that this reference observed your work performance

Please list any additional information that you feel is relevant to your application for this position:

Applicant's Certification and Agreement – PLEASE READ CAREFULLY

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that, if employed, falsified statement(s) included in this application shall be considered sufficient cause for dismissal. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

Applicant's Signature **Date**