



Sagadahoc County
State of Maine
Application for Employment

Please forward all Applications to: Sagadahoc County Administration
Attn: Human Resources
752 High Street
Bath, ME 04530

For Additional Information: Phone: 207-443-8202 Fax: 207 443-8213
E-mail: hr@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 ___ Indeed
___ 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?

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	

<p><u>Please list any additional information that you feel is relevant to your application for this position:</u></p> <p> </p> <p> </p> <p> </p> <p> </p>

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