

Are you currently employed: Yes No

May we contact your employer? Yes No

Please list previous employers, beginning with the most recent.

Employer 1: _____

Address: _____

Supervisor: _____ Title: _____ Telephone#: _____

Start Date: _____ End Date: _____ Reason for Leaving: _____

Last Position Held: _____ Final Pay Rate: _____ Hourly Salary

Duties: _____

Employer 2: _____

Address: _____

Supervisor: _____ Title: _____ Telephone#: _____

Start Date: _____ End Date: _____ Reason for Leaving: _____

Last Position Held: _____ Final Pay Rate: _____ Hourly Salary

Duties: _____

Employer 3: _____ Address: _____

Supervisor: _____ Title: _____ Telephone#: _____

Start Date: _____ End Date: _____ Reason for Leaving: _____

Last Position Held: _____ Final Pay Rate: _____ Hourly Salary

Duties: _____

I hereby certify that the facts set forth above in my employment application are true and complete to the best of my knowledge. I authorize Lewiston/Auburn 9-1-1 to investigate all information set forth in my application, by contacting my prior employers and by all other means authorized or permitted by law. I understand that if I am hired, omissions or false statements in this application or interviews will be grounds for immediate termination of employment. I also acknowledge my electronic signature to be as valid as an original.

Signature

Date