

APPLICATION FOR EMPLOYMENT LEWISTON AUBURN 911

HR/OFFICE MANAGER 552 MINOT AVE, AUBURN, ME 04210 911ADMIN@AUBURNMAINE.GOV

Lewiston Auburn 911 is an Equal Opportunity Employer. Lewiston Auburn 911 does not discriminate in hiring, promotion, discharge, pay, fringe benefits, job training, classification, referral or any other aspect of employment, on the basis of race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, genetic information, disability, or veteran status. Lewiston Auburn 911 does not discriminate against qualified applicants and employees with disabilities in hiring, promotion, discharge, pay, job training, fringe benefits, classification, referral or any other aspect of employment. Lewiston Auburn 911 also provides qualified applicants and employees with disabilities with reasonable accommodations that do not impose undue hardship on Lewiston Auburn 911.

Home Phone #: State: rn 911 before: \bigcap Yes	Zip Code:	
State:	Zip Code:	
State:	Zip Code:	
	Zip Code:	
n 911 hefore: Tyes [
	No	
	e to Visa or Immigration Stat	us: Yes No
		rily disqualify an
		_
ool Course of Stud	y Years Completed	Diploma/Degree
•		
te:		
	If yes, which brane Rank at Discharge	than a traffic violation) (Conviction will not necessary) Ool Course of Study Years Completed If yes, which branch: Rank at Discharge:

Employment History

Company Name & Location (start w/most recent employer)	Position Held	Dates	Daggan for I gaving	Supervisor's Name
		From:		
		То:		
		From:		
		То:		
		From:		
		То:		
List any other qualifications or ex				
(Such as typing, shorthand, equip	ment you can operate, ot	her languages you kno	w, etc.). (Attach additional she	eet or resume)

Personal References (not former employers or relatives)

Name & Occupation	Address	Phone Number
1.		
2.		
3.		

Applicant's Statement and Conditions of Employment

Please read carefully before signing

"I certify that this application was completed by me and that the answers given by me in this employment application are true, correct and complete. I agree that Lewiston Auburn 911 shall not be liable, in any respect, if my employment is terminated because of misstatements or pertinent omissions made by me in this application. Moreover, I understand that all offers of employment are contingent upon passing LA911's prescribed physical examination and/or drug screen and background checks."

"I agree, as a condition of my employment (should I be employed by Lewiston Auburn 911), to submit to a medical examination and/or drug screen paid for by LA911 based on the position that I accept. I also authorize any company, school, police or security personnel, or other persons to give any information regarding my employment, habits, ability, or any other characteristics whatsoever; together with any information they have regarding me whether or not it is in their records. I hereby release all physicians, examiners, companies, schools, or other persons from liability from any damages whatsoever for such testing, examining, or issuing this information. It is agreed and understood that completion of this application does not mean a job opening exists and in no way obligates LA911 to employ me."

"I understand that an investigative consumer report involving information concerning my character, employment history, general reputation, police record, personal habits, mode of living, credit and indebtedness may be obtained prior to any final offer of employment. I also agree and understand that per the Fair Credit Reporting Act, Public Law 91-508, that this is my notice of investigation."

"I understand that nothing contained herein is intended to create a contract between Lewiston Auburn 911 and me for either employment or the provision of any compensation or benefits. I understand that if I am employed by LA911 I may be subject to a probationary period during which time I may be terminated with or without cause."

During my employment with Lewiston Auburn 911 and after my employment with LA911 ends, I agree not to disclose any confidential information regarding LA911's operations or personnel. A copy of this form may be used as the original. The use of the results from this form and/or tests will be used for prudent employment decisions."

This application is valid for sixty days from the application date unless renewed in person or in writing.

Applicant's Signature: (Actual Signature Required)		Date:	
Date:	Position Applied for:	Department:	
How did vou hear about th	nis position:		