

# 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.

Last Name:	_First Name:	Middle Name:	:
Cell Phone #:	_Home Phone #	t:	_
Email Address:			
Address:			
City:	_State:	Zip Code:	
How long have you lived at the above address:			
Have you ever been employed by Lewiston Auburn Position: Are you 18 years or older: Yes No Are you prevented from lawfully becoming employ (proof of citizenship or immigration status is required upon employm	ved in this count	·	us: Yes No
Have you ever been convicted of a crime: (other the applicant from employment) Yes No If yes, Please Explain:	nan a traffic viol	ation) (Conviction will not necessa	ırily disqualifyan

**Education & Training** 

	Name & Location of School	Course of Study	Years Completed	Diploma/Degree
High School				
College				
Technical/Other				

Military Service Were you in the Armed Forces: Yes No Dates of Duty: Please list duties and training	If yes, which branch: _Rank at Discharge:	
Do you possess a valid Maine driver's license: License #: Expiration Date: License Class:Endorsements: Has your license, permit or privilege ever been susp		s 🔲No

### **Employment History**

Company Name & Location (start w/most recent employer)	Position Held	Dates	Reason for Leaving	Supervisor's Name
		From:		
		То:		
		From:		
		То:		
		From:		
		То:		
List any other qualifications or ex (Such as typing, shorthand, equip				

## 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 you hear about	this position:		
	Clear Form	Print Form	