

Employment Application

We are an Equal Opportunity Employer

Please mail/bring your completed application to:

*Town of Southwest Harbor
26 Village Green Way
PO Box 745
Southwest Harbor, ME 04679*

Or, email to:

*manager@southwestharbor.org
Marilyn Lowell, Town Manager*

Resumes may be attached, but will not be accepted in lieu of a completed application.

Job Data			
Job Title:	Date you will be available for employment:		
Job Posting No:			
Personal Data			
Name: <i>Last:</i>	<i>First:</i>	<i>Middle:</i>	
Address:			
City:	State:	Zip:	
Phone Number:	Days:	Evenings:	Alternate:
All applicants who are offered employment must provide documents which establish their identity and employment eligibility for authorization to work in the U.S.			
Do you have the legal right to work in the U.S.?	Yes	No	
Date of birth (if less than 18):			
Have you ever worked or volunteered for the Municipality?	Yes	No	
If yes, please give dates:			
Do you have any relatives employed with the Municipality?	Yes	No	
If yes, please list:			
Name:	Division:	Relationship:	
Name:	Division:	Relationship:	
Name:	Division:	Relationship:	
Driver's License No. & State:	Class:	Expiration:	
Have you had any traffic convictions or accidents in the last three years?	Yes	No	
If yes, please list:			
Conviction or Accident:	Date:		
Conviction or Accident:	Date:		
Conviction or Accident:	Date:		
Commercial Driver's License No. & State:			
Class:	Endorsements:	Expires:	
Please list other names you have used:			

Employment Application

We are an Equal Opportunity Employer

Employment History		
Current or most recent employer:		Phone:
Address:		
Your Title:		
Employment Dates	From:	To:
Supervisor's name/title:		
Hours per week:		
Work Performed:		
Reason for leaving:		
May we contact this employer if you are considered for the position?		Yes No

Employer:		Phone:
Address:		
Your Title:		
Employment Dates	From:	To:
Supervisor's name/title:		
Hours per week:		
Work Performed:		
Reason for leaving:		
May we contact this employer if you are considered for the position?		Yes No

Employer:		Phone:
Address:		
Your Title:		
Employment Dates	From:	To:
Supervisor's name/title:		
Hours per week:		
Work Performed:		
Reason for leaving:		
May we contact this employer if you are considered for the position?		Yes No

Employment Application

We are an Equal Opportunity Employer

Employment History		
Employer:		Phone:
Address:		
Your Title:		
Employment Dates	From:	To:
Supervisor's name/title:		
Hours per week:		
Work Performed:		
Reason for leaving:		
May we contact this employer if you are considered for the position?		
	Yes	No

Employer:		Phone:
Address:		
Your Title:		
Employment Dates	From:	To:
Supervisor's name/title:		
Hours per week:		
Work Performed:		
Reason for leaving:		
May we contact this employer if you are considered for the position?		
	Yes	No

Military Service		
Have you ever served on active duty in the U.S. Armed Forces?		
	Yes	No
Dates	From:	To:
Branch:		
Primary Duties:		

Conditions of Consideration for Employment

All information contained on the application is subject to verification. The Municipality of Southwest Harbor will conduct background checks including, but not limited to, work references, driving records, criminal background records and education attainment.

I understand an employment offer is also contingent upon successful review of work references, and satisfactory result of a background check. Certain positions are also conditioned on the successful completion of agility tests or skill evaluation and other appropriate investigations.

I also understand that specific positions at the Municipality of Southwest Harbor me to provide evidence of an acceptable driving record.

I further understand that certain positions with the municipality may require the applicant to be eligible for bonding. In such instances, eligibility for bonding will be a consideration in determining an applicant's fitness for such position.

If employed, I agree to provide proof of identity, relevant licensure or credentials, and authorization for employment in the United States.

If employed, I agree to abide by all municipal policies, regulations, ordinances and established work safety practices.

When advised, reasonable accommodations will be made in order for an "otherwise qualified applicant" with a disability to participate in any phase of the application/recruitment process. (Americans with Disabilities Act of 1991.)

I certify that all the information provided herein is true and complete to the best of my knowledge. I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with the Municipality of Southwest Harbor and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from municipal service.

In addition, I give the Municipality of Southwest Harbor the right to investigate and verify any information obtained through the application process. Permission is granted and I release from any and all liability any employer, agency or individual assisting the Municipality of Southwest Harbor in providing relevant, job related information that will assist in this process.

It is my understanding that this application along with any resume and letters/notes of reference, other than those letters and notes of reference I expressly submit in confidence, become a public document should I be hired by the municipality. As a result, I understand that the municipality can not guarantee me its confidentiality.

I have read and understand the above "Conditions of Consideration for Employment."

Yes No (Please check the appropriate box.)

Print Name:

Date:

Signature: