

Please mail or bring your completed application to:

TOWN OF BROWNVILLE 586 MAIN ROAD BROWNVILLE, MAINE 04414 (207) 965-2561

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

Position Specific				
Position desired:	Date you	u will be available for employment	,	
Referred by:	Are you	at least 18 years of age?	YES	NO
Personal Data				
Name (Last, First, Middle):				
Please list other names you have used:				
Street Address:				
City:	State:	Zip Code:		
Phone #:	Email Address:			
All applicants who are offered employme	nt must provide doc	cuments which establish their		
identity and employment eligibility for au	thorization to work	in the U.S. Do you have the legal		
right to work in the U.S.?			YES	NO
Have you ever worked or volunteered for the Town of Brownville?			YES	NO
If yes, please provide dates:				
Do you have any relatives employed by the	ne Town of Brownvil	le?	YES	NO
If yes, please list:				
Name:		Relationship:		
Name:		Relationship:		
Name:		Relationship:		
Driver's License #	State:	Expiration:		
License Class/Endorsements:				
Have you had any traffic convictions or ac	ccidents in the last tl	hree years?	YES	NO
If yes, please list:				
Military Service				
Have you ever served in the U.S Armed Fo	orces?		YES	NO
Dates of service:		Branch:		
Primary Duties:				
Background				
Have you ever been convicted of any crir	ne?		YES	NO

Have you ever enterer a plea of guilty or a plea of "no contest" to any crime?

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YES

NO

Background (Continued)				
Have you ever had a professional license or certification	ate suspended or revoked in any	state, or		
have you ever voluntarily surrendered, temporarily	or permanently, a professional I	icense or		
certificate in any state?			YES	NO
Has any court ever deferred, filed or dismissed prod	ceedings without a finding of guil	ty and		
required that you pay a fine, penalty or court costs	and/or imposed a requirement a	as to your		
behavior or conduct for a period of time in connect	ion with any crime?		YES	NO
Have you ever been disciplined, discharged, or aske	ed to resign from a prior position	?	YES	NO
Have you ever resigned from a prior position after a	a complaint had been received a	gainst you		
or your conduct was under investigation or review?			YES	NO
If you have answered yes to any of the previous que	estions, please provide full detail	ls below, inclu	ıding, with	
respect to court actions, the date, the offense in qu	estion, and the address of the co	ourt involved.	Use addition	onal
sheets if necessary.				
,				
*Conviction or other disposition of a crime is not n	ecessarily an automatic bar to e	mplovment.		
Education				
Have you earned a High School Diploma or G.E.D.			YES	NO
If yes, location where obtained:				
Name of Trade/Technical/Business School	Course of Study	Diploma/Ce	rtification	
Name of School, College or University	Major	Degree		
		2 08: 00		
*Proof of degrees obtained from College/Universit	ty may be required upon hire.	!		
List other licenses held, professional registrations, of		hershins:		
List other nechises field, professional registrations, e	sertificates and professional mem	ibersinps.		
List Honors, Awards, Fellowships:				
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Skills Overview				
List computer software with which you are familiar	•			
List compater software with which you are familiar	•			
Please summarize skills and experience relevant to		_		
	the position you are applying for	•		
rease summanze skins and experience relevant to	the position you are applying for	·:		
·		:		
Tools, machinery, light or heavy motor vehicle equi		:		

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Employment History			
Current or most recent employer:			
Address:		Phone:	
Your Title:	Employment dates:		
Supervisor's Name/Title:			
Starting pay:	Ending/current pay:	Hours worked per we	ek:
Work performed:			
Reason for leaving:			
May we contact this employer if you are o	considered for the position?	YES	NO
Employer:			
Address:		Phone:	
Your Title:	Employment dates:		
Supervisor's Name/Title:			
Starting pay:	Ending pay:	Hours worked per we	ek:
Work performed:			
Reason for leaving:			
May we contact this employer if you are o	considered for the position?	YES	NO
Employer:			
Address:		Phone:	
Your Title:	Employment dates:		
Supervisor's Name/Title:			
Starting pay:	Ending pay:	Hours worked per we	ek:
Work performed:			
Reason for leaving:			
May we contact this employer if you are o	considered for the position?	YES	NO
Employer:			
Address:		Phone:	
Your Title:	Employment dates:		
Supervisor's Name/Title:	•		
Starting pay:	Ending pay:	Hours worked per we	ek:
Work performed:			
Reason for leaving:			
May we contact this employer if you are o	considered for the position?	YES	NO

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References			
Please list at least two professional or edu	icational references,	and one personal reference.	
Full Name	Title/Relationship	Phone	Years Acquainted

If you are to be hired by the Town of Brownville you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

Authorization

I certify that the facts contained in this application (and any accompanying documentation/information) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovery by the Town of Brownville. I understand that any employment is conditioned on a background check. I authorize the Town of Brownville to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Town of Brownville, without giving me prior notice of such disclosure. In addition, I release the Town of Brownville, any former employers and all references listed above from any and all claims, demands or liabilities arising out of, or related to, such investigation or disclosure. I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Town of Brownville. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Town of Brownville unless made in writing. If I am offered employment, I agree to submit to a medical examination and drug test before starting work, if requested. If employed, I also agree to submit to a medical examination or drug test at any time deemed approopriate by the Town of Brownville and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose the to the Town of Brownville the results of the examination, which shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired, a condition of my employment will be that I abide by the Town of Brownville's Drug and Alcohol Policy. I understand that filling out this form does not indicate there is a position open and does not obligate the Town of Brownville to hire. If hired, I agree to abide by all Town work rules, policies, and procedures. The Town of Brownville reatins the right to revise its policies or procedures, in whole or in part, at any time. All application materials become the property of the Town of Brownville; none will be returned.

Signature	Date

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