

APPLICATION FOR EMPLOYMENT

Town of Cumberland
290 Tuttle Road
Cumberland, Maine 04021

The Town of Cumberland is an Equal Opportunity Employer and considers applications for all positions without regard to race, color, religion, age, sex, genetics, national origin, disability, sexual orientation, citizenship status or any other legally protected status. Applications are only accepted for jobs which are currently open. Be sure to list the title of the job for which you are applying.

Please print in ink or type. Answer every question clearly and completely. Where a question does not apply, answer N/A. All positions require a complete application; therefore, do not use "See Resume." Completed applications may be mailed, emailed or hand-delivered. Applications for positions with closing dates must be received by the Human Resources Office by 5:00 p.m. on the closing date.

Position Applied For:	<input type="text"/>	Date of Application:	<input type="text"/>
Last Name:	<input type="text"/>	First Name:	<input type="text"/>
		Middle Name:	<input type="text"/>
Street Address:	<input type="text"/>	City:	<input type="text"/>
		State:	<input type="text"/>
		Zip:	<input type="text"/>
Home Phone:	<input type="text"/>	Cell Phone:	<input type="text"/>
		Other Phone:	<input type="text"/>
Email Address:	<input type="text"/>		

Are you legally eligible to work in the U.S.? ☐ Yes ☐ No

If you are under 16 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ No

Can you perform the essential functions of the job for which you are applying, either with or without a reasonable accommodation? ☐ Yes ☐ No

Are you related to an employee of the Town of Cumberland? ☐ Yes ☐ No

If yes, which department?

Have you ever been employed by the Town of Cumberland? ☐ Yes ☐ No

If yes, which department?

When?

Have you ever filed an application with the Town of Cumberland? ☐ Yes ☐ No

If yes, which department?

When?

Are you currently employed? ☐ Yes ☐ No

If so, may we contact your present employer? ☐ Yes ☐ No

When are you available to commence employment?

For what shifts are you able to work? ☐ Full Time ☐ Part Time ☐ Temporary

If Part Time or Temporary, please indicate times and dates available.

How did you learn about the position for which you are applying?

If Town employee, please specify name and department.

EDUCATION & TRAINING

	Name and Location of School	Years Completed	Degree Received	Course of Study
Elementary School				
Middle/Jr. High School				
High School or GED				
Undergraduate School				
Graduate/Professional School				
Other (specify)				

Describe specialized skills (e.g. typing, computer proficiency)

List any foreign languages

List any professional licenses or certifications that you hold

List any professional, trade or civic activities and offices held

Other training (e.g. apprenticeships or U.S. Military)

EMPLOYMENT EXPERIENCE

Start with your present or most recent position. Include military service/volunteer experience. Explain fully any gaps in employment or between education and employment. Additional experience should be listed on a separate sheet of paper. Be sure to include all requested information, especially as it relates to the job for which you are applying. Do not use "See Resume." You may exclude organizations which indicate a protected status such as: race, color, religion, age, sex, genetics, national origin, disability, sexual orientation or citizenship.

Employer:	<input type="text"/>	Phone Number:	<input type="text"/>
Job Title:	<input type="text"/>	Supervisor:	<input type="text"/>
Responsibilities & Work Performed: <input type="text"/>			
Dates Employed From:	<input type="text"/>	To:	<input type="text"/>
Hourly Rate/Salary Start:	<input type="text"/>	Final:	<input type="text"/>
Reason for Leaving: <input type="text"/>			

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Job Title:	<input type="text"/>	Supervisor:	<input type="text"/>
Responsibilities & Work Performed: <input type="text"/>			
Dates Employed From:	<input type="text"/>	To:	<input type="text"/>
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Job Title:	<input type="text"/>	Supervisor:	<input type="text"/>
Responsibilities & Work Performed: <input type="text"/>			
Dates Employed From:	<input type="text"/>	To:	<input type="text"/>
Hourly Rate/Salary Start:	<input type="text"/>	Final:	<input type="text"/>
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Responsibilities & Work Performed: <input type="text"/>			
Dates Employed From:	<input type="text"/>	To:	<input type="text"/>
Hourly Rate/Salary Start:	<input type="text"/>	Final:	<input type="text"/>
Reason for Leaving: <input type="text"/>			

EMPLOYMENT EXPERIENCE (continued)

Employer: Phone Number:

Job Title: Supervisor:

Responsibilities & Work Performed:

Dates Employed From: To: Hourly Rate/Salary Start: Final:

Reason for Leaving:

Employer: Phone Number:

Job Title: Supervisor:

Responsibilities & Work Performed:

Dates Employed From: To: Hourly Rate/Salary Start: Final:

Reason for Leaving:

REFERENCES

Must be completed, include all data requested

Name: Relation to Applicant:

Address: Phone Number:

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Address: Phone Number:

Name: Relation to Applicant:

Address: Phone Number:

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Name: Relation to Applicant:

Address: Phone Number:

CONDITIONS OF CONSIDERATION FOR EMPLOYMENT

All information contained in this employment application is subject to verification. The Town of Cumberland will conduct background checks including, but not limited to, work references, driving records, criminal background records and educational attainment. I understand an employment offer is contingent upon satisfactory results of a background check, and a successful review of work references. Certain positions are also conditioned on the successful completion of agility tests or skill evaluation and other appropriate investigations.

I understand that this offer is conditioned upon the successful completion of a job placement assessment performed by Central Maine Conditioning Clinic.

I understand that any person employed on a regular full or part-time basis by the Town shall be employed on a probationary status for a period of six months. My conduct and work performance will be subject to review and evaluation during the six months, and I may be removed or demoted any time during the probationary period without review or appeal.

I further understand that certain positions with the Town 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 (I-9). If it is a requirement for an employee to possess a valid license and/or class of license or certification, it shall be a condition of employment for that employee to maintain such license and/or certification. Failure to do so may result in job loss or re-assignment.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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 in accordance with the Americans with Disabilities Act of 1990.

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 Town of Cumberland and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from municipal service.

I have read and understand the "Conditions of Consideration for Employment" ☐ Yes

Signature:

Date:

EMPLOYEE INFORMATION RELEASE FORM

I, understand that in order to assess my qualifications for the position of a full background investigation is necessary. Therefore, I hereby authorize the Town of Cumberland to conduct an investigation in order to obtain information concerning my background, which may include, but not be limited to the following:

Verification of information provided on my employment application;

Initials Date

Contacting employers (past/present), clients, business associates, professional organizations, or other institutions, regarding work performance and character;

Initials Date

Verification of licensure and/or educational attainment;

Initials Date

Criminal background check;

Initials Date

Driver's license/motor vehicle records check;

Initials Date

I hereby release any individual, agency, employer, entity, and the Town of Cumberland from all claims of liabilities that might arise from the inquiry into or disclosure of such information, including claims under any federal, state, or local civil rights law and any claims for defamation or invasion of privacy.

Initials Date

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

Initials Date

Signature

Date

Driver's License #

State Issued

Date of Birth

SSN