Application for Employment
The Town of Norridgewock is an equal opportunity employer and service provider. 09/2021

Position(s) applied for:			Date of app	Date of application:/		
Referral Source:	\square Walk-in	☐ Employee ☐ Relative	☐ Private E	nent Employm Employment A	_ ,	
	Name of referring individual or entity, if any:					
Name:	Last	First		Mid	dle	
Address:	Street	City, State		Zip	Code	
)		□ Home	□ Cell	□ Work	
()		□ Home	□ Cell	□ Work	
If necessary, best ti	me to call is:					
Email:			Are you at	least 18 years	old? □ Yes □ No	
Have you submitted	d an application to the	Town of Norridgewo	ock before?	Yes □ No		
•	es, please give date(s):	C				
Have you ever been	n employed by the Tow	on of Norridgewock?	□ Yes □	l No		
-	es, please give position	_				
•	work:/					
			•	iiiy wage		
Type of employme	nt desired: ☐ Full-tin	ne	e \Box T	emporary	☐ Seasonal	
Will you travel if the	ne job requires it? 🗆 Y	Yes □ No				
Will you relocate if	f the job requires it?	□ Yes □ No				
Are you able to me	et the attendance require	rements of the position	on? □ Yes □	No		
•	rtime if required? D, please explain					
Driver's license nu	mber, if driving is an e	ssential job function		S1	ate	

Work Experience
Provide the following information of your past and current employers, assignments, or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in the Comments section on the next page.

Employer	Phone	Dates Employed (from/to)				
Address (Street, City, State, Zip)						
Job Title						
Supervisor, Title						
Summary for Type of Work, Duties Performed, Responsibilities						
Reason for Separation						
Employer	Phone	Dates Employed (from/to)				
Address (Street, City, State, Zip)						
Job Title						
Supervisor, Title						
Summary for Type of Work, Duties Performed, Responsibilities	Summary for Type of Work, Duties Performed, Responsibilities					
Reason for Separation						
Employer	Phone	Dates Employed (from/to)				
Address (Street, City, State, Zip)						
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Summary for Type of Work, Duties Performed, Responsibilities						
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Address (Street, City, State, Zip)						
Job Title						
Supervisor, Title						
Summary for Type of Work, Duties Performed, Responsibilities						
Reason for Separation						

Work Experience (cont'd) **Comments:** Include explanation of any gaps in employment or other relevant information. Skills & Qualifications: Summarize any special training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position(s) for which you are applying. **Educational Background** List any schools attended, starting with the most recent. Provide any relevant information, if applicable. School Attended City/State Years Completed Degree/Diploma GPA/Class Rank Minor Major School Attended City/State Years Completed Degree/Diploma GPA/Class Rank Major Minor School Attended City/State Years Completed Degree/Diploma GPA/Class Rank Major Minor School Attended City/State Years Completed Degree/Diploma Major Minor GPA/Class Rank **Professional References** List the name and telephone of three business/work references that are not related to you and are not previous supervisors. If not applicable, list three school or personal references that are not related to you. Telephone # years known Affiliation Name Telephone Name # years known Affiliation Telephone Name # years known Affiliation

Additional Information

Also, list any offices l	neld. Exclude memberships that	ations of which you are a member that may but would reveal race, color, religion, sec, natio, or any other similarly protected status.		
Organization		Member Status/Office Held	Dates (from/to)	
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Organization		Member Status/Office Held	Dates (from/to)	
	ement & Acknowled complete until it is fully comp	gment pleted, signed, and all statements below have b	be read and initialed.	
Initial:	I certify that all of the information furnished on this application and during the application process is true, complete, and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts call for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.			
Initial:	I recognize that this employment application is not an offer of employment. I agree that if I am hired by the Town of Norridgewock, I will be an at-will employee, meaning that either the Town or I may end the employment relationship at any time with or without cause or notice. I understand that only the Select Board of the Town of Norridgewock, and no manager, supervisor, or other representative of the Town, has authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the at-will employment relationship, and with respect to any agreement entered into by the Select Board, any such agreements must be in writing and signed by the Select Board or its authorized representative.			
Initial:	I further understand and agree that, except for my at-will employment status, if hired, my wages, hours, working conditions, job assignment(s), and compensation rate(s) will be subject to change by the Town of Norridgewock.			

I understand that if I am offered employment, I may be required to sign a non-solicitation and non-Initial:_____ disclosure agreement, as a condition of the employment. I understand that the Town may share the information contained in this application with other Town Initial: employees for employment and administrative purposes and hereby consent to such transfer. Initial:____ I hereby authorize, to the extent allowed by applicable federal, state, and local laws, the Town of Norridgewock to conduct its own investigation of my references, employment history, and education and, further, authorize by references and prior employers I have listed to disclose to the Town information related to my employment history and qualifications for the position for which I am applying, without giving me prior notice of such disclosure. In addition, I hereby release the Town, my former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. I understand and expressly agree that if employed by the Town, storage areas provided for me (locker, Initial: desk, etc.) are open to investigation by the Town without prior notice to me.

Applicant St	atement & Acknowledgment (cont'd)	
Initial:	I agree to undergo a pre-employment physic state law.	cal examination, if required, as consistent with federal and
Initial:		g testing upon an offer of employment from the Town of agree that any offer of employment is contingent upon my
Initial:	true, complete, and correct to the best of r	d on this application and during the application process is ny knowledge. I understand that any misrepresentation or al to hire or, if hired, may result in my dismissal at any time ions are discovered.
contains all the	· · · · · · · · · · · · · · · · · · ·	terms and conditions stated in this application, which ock and me concerning the topics addressed herein, and wn of Norridgewock and me on such issues.
Signature of Applica	nt	 Date

This application will only be considered for 30 days. If you have not been hired within 30 days of submitting this application and you wish to continue to be considered for employment, you must complete another application. The Town of Norridgewock will retain this application for a period of two (2) years, or as required by law.