## **Town of West Paris**

25 Kingsbury St. West Paris, Maine 04289

Phone: (207) 674-2701

Fax: (207) 674-2703

## **Employment Application**

		Applicant	Inform	nation				
Full Name:						Date:		
	Last	First			M.I.			
Address:					*			
	Street Address					Apartmenl/Unit ‡	£	
	City		****		State	ZIP Code	-	
Phone:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Email_					
Date Available: Social Security No.:_					Desired Salary:\$			
Position App	olied for:							
Are you a citizen of the United States?  YES NO				are you	authorized to work	YES k in the U.S.?	NO	
Have you ev	er worked for this com	YES NO	If yes,	when?_		-		
		Education	Inform	ation		Signal Superior Control	200	
High School:		Address	:					
From:	To:	Did you graduate?	YES	NO	Diploma:			
College:		Address:		-				
From:	To:	Did you graduate?	YES	NO	Degree:			
Other:		Address:						
From:	To:	Did you graduate?	YES	NO	Degree:			

Discialitier and Signature
I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.
Signature: Date:

We consider applicants for all positions without regard to race, color, religion, sex, national origin, martial or veteran status, the presence of a non-job related medication condition or handicap, or any other legally protected status.