



PUBLIC WORKS - Application for Employment

APPLICANT INFORMATION

Name: _____ SS #: _____
Last First Middle

Address: _____
Street City State Zip

Phone: _____ Cell: _____ Are you atleast 18 years old? Yes No

Email: _____

Are you a U.S. citizen or permanent resident alien with a legal right to work in the U.S.? Yes No

Can you, after employment, verify your legal right to work in the U.S.? Yes No

Have you ever been convicted of a crime (other than minor traffic violations) in the last 5 years? Yes No

If Yes, please explain: _____

Have you ever worked for us in the past? Yes No If yes, when: _____

Do you hold a valid Class A Driver's License? Yes No If Yes, State of Issue: _____

License #: _____ Expiration Date: _____

EMPLOYMENT HISTORY

Are you currently employed? _____ If yes, may we contact your employer? _____ Supervisor: _____

Company	_____			Phone: () _____
Address:	_____			Supervisor: _____
Position:	_____	Starting Wage:	_____	Ending Wage: _____
Responsibilities:	_____			
From:	_____	To:	_____	Reason for Leaving: _____
May we contact your previous supervisor for a reference?	_____	If not, why?	_____	
Hours per week:	_____	Schedule:	_____	

Company	_____			Phone: () _____
Address:	_____			Supervisor: _____
Position:	_____	Starting Wage:	_____	Ending Wage: _____
Responsibilities:	_____			
From:	_____	To:	_____	Reason for Leaving: _____
May we contact your previous supervisor for a reference?	_____	If not, why?	_____	
Hours per week:	_____	Schedule:	_____	

Company	_____			Phone: () _____
Address:	_____			Supervisor: _____
Position:	_____	Starting Wage:	_____	Ending Wage: _____
Responsibilities:	_____			
From:	_____	To:	_____	Reason for Leaving: _____
May we contact your previous supervisor for a reference?	_____	If not, why?	_____	
Hours per week:	_____	Schedule:	_____	

EDUCATION AND TRAINING

High School		Years Attended		Subjects Studied	
Vocational		Years Attended		Skills/Training	
College		Years Attended		Subjects Studied	
Military		Years Attended		Skills/Training	
Do you currently hold a Water Operator License:		<input type="checkbox"/>	If yes, class:		
Do you currently hold a Maine State Inspection License:		<input type="checkbox"/>	If yes, expiration date:		
Contruccion/Heavy Equipment Training/Skills: (please describe)					

REFERENCES

Please list 3 professional & personal references (family members are excluded) who have known you for at least 1 year. May also attach letters of recommendation. Make sure to inform references about potential contact.

Full Name:		Phone:	()
Address:		Email:	
Relationship to applicant:		Years known:	
Full Name:		Phone:	()
Address:		Email:	
Relationship to applicant:		Years known:	
Full Name:		Phone:	()
Address:		Email:	
Relationship to applicant:		Years known:	

PHYSICAL REQUIRMENTS

Please review prior to applying

Sitting Frequent	Standing Frequent	Walking Frequent
Driving Frequent	Slippery Conditions Frequent	Temperatures Between -30 and 100 Degrees
Noise Exposure (>85 Decibels) Occasional	Personal Protective Equipment Frequent	Language English
Wrist Deviation (Side to Side) Occasional	Hand/Wrist Repetition (Up & down) Frequent	Reaching Frequent
Twisting Frequent	Grasping Frequent (Simple <50 lbs)	Grasping Occasional (Firm >50 lbs)
Bending Frequent	Pulling Occasional Up to 100 lbs	Pushing Occasional Up to 100 lbs
Lifts & Carries (Including Overhead) Frequent Up to 50 lbs Occasional 51-100+ lbs	Manual Dexterity/Strength Gross motor, moderate-heavy strength Fine motor, moderate-heavy strength	
Squatting/Kneeling/Climbing/Crawling Frequent	Visual Close Eye Work/Focus Color Discrimination Depth Perception Distance Vision	
Hearing/Speaking Within 100 Feet (Telephone, Radio, Etc)		

PHYSICAL REQUIRMENTS (Cont.)

Do you have any physical limitations that may prevent you from performing all of the requirements of this position?

If yes, please explain: _____

Position Requirments/Information

- A pre-employment physical will be performed by a provider of the Organization prior to hiring
- Drug and Alcohol testing will be conducted prior to hiring
- Random Drug and Alcohol testing will be conducted for all employees
- Driver's License review will be conducted prior to hiring and annually

Position Desired: _____ Hourly Wage Requested: \$ _____

Hours Per Week: _____ Days Available: Sunday Monday Tuesday Wednesday
 Thursday Friday Saturday

Public Works postions require availabilty for days, evenings, nights, and weekends. On-Call rotation is also required.

Job Tasks: Plowing, sanding, road grading, water main replacement and repair, vehicle maintenance & repair, building maintenance & repair, and many other tasks as assigned.

DISCLOSURE and AUTHORIZATION

Please Read and Sign the Following Statements

I certify, under penalty of law, that the information given in this application is correct and complete to the best of my knowledge. I am aware that, should investigation at any time show falsification, I will not be considered for employment or, if employed, I may be dismissed. I hereby authorize Lake Arrowhead Community and agencies with whom my name is certified/referred to make all necessary investigations concerning me, my work habits, previous employment or experience, and other situations as are applicable to the position I am applying for. I authorize Lake Arrowhead Community to check my driving record. I authorize Lake Arrowhead Community, Inc. to contact former employer(s), persons given as reference, and other organizations including law enforcement to provide all information that may be sought in connection with my application. With this permission I release the organization from any liability as a result of such contact. I understand and agree that I will be required to ratify the information contained in this application by signature as a condition of my employment.

In consideration of my employment, I agree to conform to the company's rules and regulations and I agree that my employment and compensation can be terminated with or without cause and with or without notice at any time at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed with or without cause and with or without notice at any time by the company. I understand that no company represenatative, other than its president and then only when in writing and signed by the president has any authority to enter into any agreement for employment for any specific period of time or to make any agreement contrary to the foregoing.

I have read and understand the nature of the position I am applying for and the duties associated with it and if hired, I attest that I can perform the required functions and duties of my job to the best of my abilities with or without reasonable accomodation.

Signature: _____ Date: _____

Please submit your completed application with appropriate copies of verification materials as applicable with your cover letter and resume

Office Use Only

Manager: Scott Davis, Public Works Manager Date Interviewed: _____

Postion: Public Works Crew Member Hired Yes No

Start Date: _____ Wage: \$ _____

Notes: _____
