

APPLICATION FOR EMPLOYMENT

**Houlton Police Department
97 Military Street
Houlton, Maine 04730**

All applicants to the Police Department must file the following material with the application in order for your application to be deemed complete:

1. A LEGIBLE photocopy of your Motor Vehicle Operator's License;
2. Evidence of your High School graduation or its equivalent;
3. Copies of relevant documents verifying employment, education or training experience.
4. The employment application must be signed by the applicant **and** notarized by a Notary Public [NOTE: YOU MUST SIGN IN THE PRESENCE OF THE NOTARY].

Please return your application along with the above-described attachments to:

**Town of Houlton
Personnel Manager
21 Water Street
Houlton, Maine 04730**

Only complete applications will be forwarded to the Town of Houlton for its consideration. An application must be completed and filed with the Personnel Director prior to the posted closure date for the applicant to be considered for the position. It remains the sole responsibility of the candidate to file a complete application with all necessary attachments prior to the posted closure date. Applications that are not complete will not be considered and your resume will be removed for further consideration.

PERSONAL

Date: _____

Name: _____

First

Middle

Last

Date of Birth: _____

Present Address: _____

Telephone or contact number: _____

Are you a citizen of the USA? _____

If your application is considered favorably, on what date will you be available to work?

Have you ever been convicted of a Class A, B, C or D crime? _____

If yes, to any of the above, describe in full: _____

Any traffic infractions: _____

If yes, to any of the above, describe in full:

List below all addresses at which you have resided in the last 15 years.

1. _____

Dates: _____

2. _____

Dates: _____

3. _____

Dates: _____

4. _____

Dates: _____

5. _____

Dates: _____

List all acquaintances or relatives that are currently members of the department. _____

RECORD OF EDUCATION

High School Address Last year Completed Graduate

College Address Program Degree

College Address Program Degree

MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces? _____ If yes, what Branch? _____

Dates of Duty: From _____ To: _____

Rank at discharge: _____ Type of discharge: _____

List duties in the Service including special training: _____

PERSONAL REFERENCES (Not former employers or relatives)

Name and Occupation Address Phone number (MANDATORY)
1. _____
2. _____
3. _____
4. _____

EMPLOYMENT RECORD

List below all present and past employment for the past ten years, beginning with your most recent.

1. Name and address of company From /To Work Performed

Starting Salary Ending Salary Reason for Leaving Name of Supervisor

2. Name and address of company From /To Work Performed

Starting Salary Ending Salary Reason for Leaving Name of Supervisor

3. Name and address of company From /To Work Performed

Starting Salary Ending Salary Reason for Leaving Name of Supervisor

4. Name and address of company From /To Work Performed

Starting Salary Ending Salary Reason for Leaving Name of Supervisor

Use additional pages if necessary

PLEASE LIST JOB-RELATED EXPERIENCES

The facts set forth above in my application for employment are true and complete. In understand that false statements on this application will disqualify me and if employed shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative agencies of your choice. In making this application for employment, I also understand that an investigation will be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am aquatinted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. In understand that it is my responsibility to keep the Commission apprised of my current address and telephone number. Further, punctual attendance at all required examinations, physical agility test and polygraph, are also my responsibility. In understand that failure to meet any of the above obligations may result in my immediate disqualification from the eligibility list.

Signature

STATE OF MAINE

_____20_____

Personally appeared the above applicant and made oath that the information contained in this application is true and correct to the best of his/her knowledge and belief.

Before me, _____ Commission Expires: _____

Notary Public

YOU MUST ATTACH TO THIS APPLICATION THE FOLLOWING DOCUMENTS:

- (1) A LEGIBLE photocopy of your Motor Vehicle Operator’s License
- (2) Evidence of your High School graduation or its equivalent;
- (3) Copies of relevant documents verifying employment, education or training experience, as outlined