

206 Old Portland Road • North Waterboro ME 04061 (207) 247-5239 • Fax (207) 247-5604 lacinc@lacinc.org www.lacinc.org

PUBLIC WORKS - Application for Employment

APPLICAN	T INFORI	MATION										
Name:		Last			First			Middle		_ SS #	:	
Address:		Lasi		'	FIISL			ivildale				
addiess.		Street							City		State Zip	_
Phone:						Cell: _					Are you atleast 18	
Email:											years old? Yes No	
•		n or permane yment, verify				_	_		k in the	u.S.?	Yes No Yes No	
Have you ev	ver worke	d for us in the	e past?			Yes		No	If ye	es, when	:	
Do you hold	l a valid C	Class A Driver	's Licer	se?		Yes		No		If Yes,	State of Issue:	
	Lie	cense #:						E	xpiratio	n Date:		
EMPLOYMI	ENT HIS	TORY										
Are you curi	rently em	ployed?	_ If ye	s, may	we c	ontact	your er	nploye	er?	Supe	rvisor:	_
Company											Phone: ()	
Address:											Supervisor:	
Position:						Sta	arting W	/age:			Ending Wage:	
Responsibil	ities:											
From:			To:					Reaso	on for L	eaving:		
May we con	tact your	previous sup	ervisor	for a re	eferen	nce?		If not,	why?			
Hours per w	eek:		Sched	dule:								
Company											Phone: ()	
Address:											Supervisor:	
Position:						Sta	arting W	/age:			Ending Wage:	
Responsibil	ities:									<u> </u>	•	
From:		•	To:					Reaso	n for L	eaving:		
May we con	tact your	previous sup	ervisor	for a re	eferen	nce?	•	If not,	why?			
Hours per w	eek:		Sched	dule:			•			•		
Company											Phone: ()	
Address:											Supervisor:	_
Position:						Sta	arting W	/age:			Ending Wage:	
Responsibil	ities:									<u> </u>	•	
From:			To:					Reaso	on for L	eaving:		
May we con	tact your	previous sup	ervisor	for a re	eferen	nce?		If not,	why?			
Hours per w	/eek:		Sched	dule:						•		-
			_	L								-

EDUCATIO	N AND TRAINING	i						-					
High School				Ye	Years Attended			Subjects Stu	ıdied				
Vocational				Ye	Years Attended			Skills/Training					
College					Years Attended			Subjects Studied					
Military	Military				Years Attended			Skills/Training					
Do you currently hold a Water Operator License:					If yes, class:								
Do you curre	ently hold a Maine	State Inspection	Licen	se:] _	If yes, e	expirat	ion date:					
Contruction/	Heavy Equipment	Training/Skills: (p	lease	e describ	e)								
REFERENC	ES												
Please list 3 pro	ofessional & personal ı			re excluded o inform ref					ear. Ma	y also attach le	etters of reco	mmendation.	
Full Name:								Phone:	()			
Address:								Email:					
Relationship	to applicant:								Years known:				
Full Name:								Phone:	()			
Address:								Email:					
	to applicant:					Years known:							
Full Name:								Phone:	()			
Address:					Email:								
Relationship to applicant:									Years known:				
PHYSICAL	REQUIRMENTS												
	Sitt	ina	Plea	se revie		or to ap Standi		<u>g</u>	1		Walking		
	Sitting Frequent		Frequent							Frequent			
	Driving Frequent			Slippery Condit Frequent						Temperatures Between -30 and 100 Degrees			
	Noise Exposure (>85 Decibels)			Personal Protective)]	Language			
	Occasional			Frequent					<u> </u>	English			
	Wrist Deviation (Side to Side) Occasional			Hand/Wrist Repetition (Up & down) Frequent						Reaching Frequent			
	Twisting Frequent		Fr	Grasping Frequent (Simple <50 lbs)					Grasping Occasional (Firm >50 lbs)				
Bending					Pulling						Pushing		
					ccasio	onal Up	to 100		Occasional Up to 100 lbs				
	Lifts & Carries (Including Overhead) Frequent Up to 50 lbs								al Dexterity/Strength r, moderate-heavy strength				
	Occasional 51-100+ lbs								oderate-heavy strength				
	Squatting/Kneeling/Climbing/Crawlin Frequent			awling		Close			Visual Eye Work/Focus				
						Colo				Discrimination			
	<i>Hearing/Speaking</i> Within 100 Feet (Telephone, Radio, E			in Etc)		Depth Polistand				•			
	within 100 Feet (Telephone, Radio, Etc)							טוט	nance '	v 13IUI I		l 	

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 availability 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						
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 representative, 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: Postion: Public Works Crew Member Hired Yes No Start Date: Notes:						