



City of Westbrook, Maine

- DEPARTMENT OF PUBLIC SERVICES -

APPLICATION FOR EMPLOYMENT

Thank you for your interest in employment with the City of Westbrook.

General Information and Instructions

1. All items on the application form must be filled out or marked "NA" meaning they do not apply to the applicant. Failure to fully complete this form may result in automatic disqualification. Assistance is available upon request to help complete the application.
2. The City of Westbrook is an Equal Opportunity Employer and shall not discriminate against an employee or applicant for employment or advancement because of race, color, sex, marital status, physical or mental disability, religion, age, ancestry, national origin, sexual orientation or any other basis protected by statute.
3. The City Of Westbrook shall employ the best qualified persons who are available at the salary levels established for City employment.
4. Upon appointment, all employees shall be subject to a period of six (6) months probation unless otherwise specified by the Personnel Rules and Regulations or applicable union contract.
5. Applications will be kept active for a period of one (1) year, during which they may be reconsidered for existing vacancies, upon request of the applicant.
6. Please return the signed Application with any supplemental material in person, by mail or email to:

**Westbrook City Hall
Attn: Office of Human Resources
2 York Street
Westbrook, Maine 04092**

HR@westbrook.me.us

APPLICATION FOR EMPLOYMENT

(PLEASE PRINT)

It is the City's policy to comply with all applicable federal and state laws prohibiting discrimination in employment based on race, color, sex, marital status, physical or mental disability, religion, age, ancestry, national origin, sexual orientation or any other basis protected by statute.

PERSONAL INFORMATION

Name:	Date:
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Street:	City:	State:	Zip:
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Phone:	Alt. Phone:	Email:
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Do you have any relatives currently working for the City Of Westbrook? Yes No

Are you authorized to work in the United States on an unrestricted Basis? Yes No

Are you at least 18 years of age? Yes No

Have you ever been convicted of a felony? Yes No
If yes, please explain: (conviction will not necessarily disqualify an applicant for employment)

Have you ever applied for employment or worked here before? Yes No
If yes to either, please give details:

Have you been told the essential functions of the job or have you been shown a copy of the job description listing the essential functions of the job? Yes No

Can you perform these essential functions with or without reasonable accommodations? Yes No

Do you currently hold a valid State of Maine Commercial Driver's License? Yes No
If Yes, please list any additional License Endorsements:

Have you ever had your driver's license suspended or revoked? If Yes, please explain (suspension/revocation will not necessarily disqualify an applicant for employment) Yes No

Do you currently reside in one of the following twenty-one (22) neighboring cities/towns: Those are: Westbrook, Portland, South Portland, Scarborough, Gorham, Windham, Falmouth, Cape Elizabeth, Old Orchard, Saco, Buxton, Standish, Gray, Cumberland, North Yarmouth, Biddeford, Yarmouth, Freeport, Hollis, Raymond, Limington and Sebago. Yes No

Position Applied For: _____

When Can You Start: _____

EDUCATION

Institution	Name & Location of School	Year Graduated	Major	Diploma/Degree
High School				
College/University				
College/University				
Other Training/Education:				

In addition to your work history, what other experiences, skills or qualifications would especially suit you for this position:

WORK HISTORY

(List your relevant employment history, including all jobs held for at least the past 10 years. Use separate sheets, if necessary)

Most Recent Employer:	Address:	Phone:
Date Started:	Date Left:	
Starting Position:		Position upon Leaving:
Name and Title of Last Supervisor:		Reason for Leaving:
Description of Duties (# of people supervised, if appropriate):		

Previous Employer:	Address:	Phone:
Date Started:	Date Left:	
Starting Position:		Position upon Leaving:
Name and Title of Last Supervisor:		Reason for Leaving:
Description of Duties (# of people supervised, if appropriate):		

Previous Employer:	Address:	Phone:
Date Started:	Date Left:	
Starting Position:		Position upon Leaving:
Name and Title of Last Supervisor:		Reason for Leaving:
Description of Duties (# of people supervised, if appropriate):		

Previous Employer:	Address:	Phone:
Date Started:	Date Left:	
Starting Position:		Position upon Leaving:
Name and Title of Last Supervisor:		Reason for Leaving:
Description of Duties (# of people supervised, if appropriate):		

REFERENCES

List two people not related to you who have known you for at least one (1) year.

Name	Address	Phone	Relationship & Years Acquainted
1.			
2.			

EMERGENCY CONTACT INFORMATION

Name:	Phone:	Alternate Phone:
Address:		

PLEASE READ BEFORE SIGNING

I certify that all statements made by me on this application, my resume and any other accompanying documents are true and complete to the best of my knowledge, and that I have withheld nothing which, if disclosed, would materially alter or contradict the facts contained therein. I understand that false statements, omissions or misrepresentations may result in the disqualification of this application for employment with the City, or a withdrawal of any offer of employment, or if so employed, my dismissal from such employment.

I authorize my previous employers, schools which I attended and character references to provide any and all information pertaining to my tenure or contact with them, which is relevant to this application for employment; and I agree that persons or organizations providing such information, or the City Of Westbrook, shall not be liable should the information so provided warrant my disqualification from employment with the City or if employed, my dismissal from such employment.

I understand that it will be necessary to conduct a personal background, credit and reference check, and if the position warrants it, criminal histories check. I hereby authorize the City to conduct such an examination and persons or organization contacted to provide such information.

I further understand that any offer of employment is conditional upon satisfactory completion of a physical examination at the City's expense, when the nature of the position requires one, and that the examination will focus on my present ability to perform the essential functions of the position.

Signature: _____

Date: _____

FAIR CREDIT REPORTING ACT CONSUMER DISCLOSURE AND GENERAL AUTHORIZATION

In connection with my application for employment with the City of Westbrook, Maine ("City"), I understand that a consumer report or investigative consumer report, as those terms are defined in the federal Fair Credit Reporting Act as amended ("FCRA"), 15 U.S.C. 1681 *et seq.*, may be obtained by the City from a consumer reporting agency ("Agency"). I further understand that the Agency may not give out information about me to the City without my written consent. It is also understood that the Agency may not report medical information about me to the City without my specific prior consent as to the release of such information, which is in addition to my general authorization herein.

I understand that an investigative consumer report is a special type of consumer report in which information about my character, general reputation, personal characteristics, and mode of living is obtained through personal interviews. In the event an investigative consumer report is obtained, I understand that I (a) am entitled to receive a summary of my rights, and (b) have the right to request additional disclosures provided for below as follows:

Upon my written request to the City within a reasonable period of time after my receipt of this *Fair Credit Reporting Act Consumer Disclosure and General Authorization*, the City shall make a complete and accurate disclosure of the nature and scope of the investigation requested. It is understood that this disclosure shall be made in writing mailed, or otherwise delivered, to me not later than five (5) days after the date on which the request for such disclosure was received from me or such report was first requested, whichever is later in time.

I hereby authorize the City now, or at any time while I am employed by the City, to obtain a consumer report or investigative consumer report on me, as applicable. This authorization does not include the release of my medical information. I further acknowledge that I have received a summary of my rights under the FCRA.

Applicant Signature	Date	Printed Name
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A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you – such as if you pay your bills on time or have filed bankruptcy – to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681 *et seq.*, at the Federal Trade Commission's Internet web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or state attorney general to learn those rights.

- ◆ **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you – such as denying an application for credit, insurance, or employment – must tell you, and give you the name, address and phone number of the CRA that provided the consumer report.
- ◆ **You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person had taken action against you because of the information supplied by the CRA, if you request the report within sixty days of receiving notice of the action. Where applicable, you also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within sixty days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- ◆ **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit. Unless your evidence is frivolous. The source must review your evidence and report its findings to the CRA. (The source must also advise national CRAs – to which it has provided data – of any error.) The CRA must give you a written report of the investigation and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- ◆ **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within thirty days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change in your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- ◆ **You can dispute inaccurate items with the source of the information.** If you tell anyone – such as a creditor who reports to the CRA – that you dispute an item. They may not then report the information to the CRA without including a notice of your dispute. In addition, once you're notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- ◆ **Outdated information must not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- ◆ **Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA – usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- ◆ **Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- ◆ **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- ◆ **You may seek damages from violators.** If a CRA, a user of (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.