

60 Chamberlain Road  
Scarborough, ME 04074

Phone: (207) 883-6680  
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526 Post Road  
Wells, ME 04090

Phone: (207) 641-2555  
Fax: (207) 641-2550

### APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_

Name: \_\_\_\_\_ SS Number: \_\_\_\_\_  
Last First MI

Present Address: \_\_\_\_\_  
Street City State Zip Code

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Are you employed now? \_\_\_\_\_

Position applying for: \_\_\_\_\_ Date Available: \_\_\_\_\_

Have you applied to the Agency before? \_\_\_\_\_ For what position: \_\_\_\_\_

Education	Name/Location	No. Yrs Attended	Did you Graduate	Subjects Studied
High School				
College				
Trade, Business or Correspondence School				

Please indicate any additional skills or qualifications you wish us to consider:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime? (Circle one) Yes No Do you have a clean driving record? Yes No

Have you ever been involved in a substantiated case of child or adult abuse, neglect or mistreatment? Yes No

If the answer is Yes to any of the above questions, please state what, when, where and the disposition of the offense:

\_\_\_\_\_  
\_\_\_\_\_

Are you legally eligible for employment in this country? Yes No

## EMPLOYMENT HISTORY

Month/Year	Employer Address Immediate Supervisor	Position	Salary	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				

### **REFERENCES:**

Please list three references, preferably two former or current supervisors and a coworker.

Name	Telephone or Email Address	Business/Relationship	Yrs Acquainted

I understand and agree that any false, misleading, or omitted information by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's services if I have been employed. Furthermore, I understand that just as I am free to resign with proper notice, the Morrison Center reserves the right to terminate my employment as any time, with or without cause and without prior notice. I understand that no representative of the Morrison Center has the authority to make any assurance to the contrary.

I give the Morrison Center the right to investigate all references with my permission and to secure additional information about me, if job related. This may include criminal records check, motor vehicle/driving record check, adult/child abuse check, as required by the position for which I am applying. I hereby release from liability the Morrison Center and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_