

**APPLICATION FOR EMPLOYMENT  
CITY OF WATERVILLE, MAINE**

**PERSONAL QUALIFICATION STATEMENT**

1. Title of position or type of job you are filing for: \_\_\_\_\_
2. Date of this application: \_\_\_\_\_
3. Name of Applicant: \_\_\_\_\_  
(Last Name, First Name, Middle Name or Initial)
4. Address: \_\_\_\_\_  
(Number and Street or Post Office Box, City, State, Zip Code)
5. Telephone number of your residence: \_\_\_\_\_
6. Another telephone number where a message may be left, if necessary: \_\_\_\_\_
7. Did you graduate from high school?    \_\_\_\_\_ Yes    \_\_\_\_\_ No
8. Name and location (City and State) of last high school attended: \_\_\_\_\_  
\_\_\_\_\_
9. Name and location (City and State of college or university attended: \_\_\_\_\_  
\_\_\_\_\_  
Dates attended: \_\_\_\_\_                      Credits Completed: \_\_\_\_\_  
Type of Degree: \_\_\_\_\_                      Major field of study: \_\_\_\_\_
10. Other schools of training (for example: trade, vocational, armed forces or business).  
Please give the name and location (City and State) of each school or source of training,  
dates attended, subjects studied, certificates received (if any) and any other pertinent  
information.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Do you have any experience or skills applicable to the position for which you are applying?

\_\_\_\_ Yes                      \_\_\_\_ No

If yes, please indicate what they are:

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12. WORK EXPERIENCE – PRESENT or LATEST position:

May inquiry be made of your present or last employer regarding your qualifications and record of employment? \_\_\_\_ Yes                      \_\_\_\_ No

Date of employment (month and year): From: \_\_\_\_\_ To: \_\_\_\_\_

Title of position or type of job held: \_\_\_\_\_

Name of employer, company, firm, or organization: \_\_\_\_\_

Employer's address: \_\_\_\_\_

Employer's Telephone No.: \_\_\_\_\_

Description of work: (Please describe in as much detail as possible)

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13. WORK EXPERIENCE – Before your present or latest position:

Date of employment (month and year): From: \_\_\_\_\_ To: \_\_\_\_\_

Title of position or type of job held: \_\_\_\_\_

Name of employer, company, firm, or organization: \_\_\_\_\_

Employer's address: \_\_\_\_\_

Employer's Telephone No.: \_\_\_\_\_

Description of work: (Please describe in as much detail as possible)

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14. ANY OTHER WORK EXPERIENCE:

Dates of Employment (month and year):

Title of position or type of job held:

From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_\_\_

Names and addresses of employers, companies, firms or organizations:

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

Description of work:

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

15. REFERENCES: List 3 or more persons who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. DO NOT repeat names of employers that you may have listed in Items 12, 13, or 14 of this application.

Full Name	Address	Business or Occupation	Telephone Number
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

16. CERTIFICATION: I certify that all statements made in this application are true, complete and correct to the best of my knowledge and belief, and are made in good faith.

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Date Signed)