

# APPLICATION for EMPLOYMENT

Form Updated: 11-19-23



80 Moosehead Trail, PO Box 250 Newport, ME 04953 207-356-5540

\*use BLUE or RED pen

DATE: \_\_\_\_\_

Name:	AGE:	Cell Ph:
Street Address:	Soc Sec #	Home Ph:
Town, State, Zip:		Email:
Year, Make and Color of Car:		License Plate #:
High School:	Did you graduate?	What year?
College:	Did you graduate?	What year?
Position Applying For:	Wage Desired:	Hrs Per Week Desired Range:

## Previous Employer(s)

(1) Company Name:	Address:	Phone:
Your Position:	Wage:	Reason for Leaving:
(2) Company Name:	Address:	Phone:
Your Position:	Wage:	Reason for Leaving:
(3) Company Name:	Address:	Phone:
Your Position:	Wage:	Reason for Leaving:

**Time at Company (1)** \_\_\_/\_\_\_/\_\_\_ **to** \_\_\_/\_\_\_/\_\_\_ **Time at Company (2)** \_\_\_/\_\_\_/\_\_\_ **to** \_\_\_/\_\_\_/\_\_\_ **Time at Company (3)** \_\_\_/\_\_\_/\_\_\_ **to** \_\_\_/\_\_\_/\_\_\_

Can you lift 70 lbs. on a daily basis? \_\_\_\_\_ Who referred you to Bears? \_\_\_\_\_

Do you have a valid Maine driver's license? \_\_\_\_\_ Do you have anything on your driving record? \_\_\_\_\_ Explain. \_\_\_\_\_

Have you ever been convicted or arrested for any crimes? \_\_\_\_\_ If so, Explain. \_\_\_\_\_

Do you have any health problems or medical conditions we should know about? \_\_\_\_\_

Are you related to any past or present employees of Bears? If so who and how? \_\_\_\_\_

Are you available to work on weekends? \_\_\_\_\_ \*NOTE\* Answer honestly, you will be called upon.

Are you available to be here at 5:00 am to help open? \_\_\_\_\_ if so what days? \_\_\_\_\_

Are you available to stay until 9:30 pm to help close? \_\_\_\_\_ if so what days? \_\_\_\_\_

please Check positions that interest you:

- \_\_\_\_\_ Cashier
- \_\_\_\_\_ Meat Dept
- \_\_\_\_\_ Stock Clerk
- \_\_\_\_\_ Kitchen/Bakery/Deli
- \_\_\_\_\_ General Help/Anything

What are the Min # of hours you want to work per week? \_\_\_\_\_

What are the Max # of hours you want to work per week? \_\_\_\_\_

Are you available to be called in if needed? \_\_\_\_\_

What date can you start work? \_\_\_\_\_

## List 3 Job References

Name:	Phone#	Relation:
Name:	Phone#	Relation:
Name:	Phone#	Relation:
Who would we contact in a case of an emergency?		Phone:

## How can you benefit BEARS ONE STOP?

I certify that all my answers are true and complete, to the best of my Knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate release. I authorize the verification of any or all the information above.

Your Signature: **X** \_\_\_\_\_