



DIRIGO PINES
Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. Accommodations to enable all individuals to participate in the application process will be provided upon advance request.

Please Print

Position(s) Applied For: Date of Application

How Did You Learn About Dirigo Pines?

- Walk-In
Advertisement (where?)
Dirigo Pines Employee (who?)
Internet (which website?)
Other (please explain)

Last Name First Name Middle Name

Address Street City State Zip Code

Telephone Number Social Security Number (last 4 digits only) Email Address

Please answer all of the following questions.

- Are you at least 18 years of age?
If no, can you provide proof of your eligibility to work?
Are you currently employed?
May we contact your current employer?
Are you legally eligible for employment in the U.S.?
Have you ever been dismissed from employment, forced to resign or resigned to avoid being dismissed?

Dirigo Pines Inn, LLC conducts criminal record checks. Failure to divulge complete information will disqualify you from employment. However, conviction will not necessarily disqualify an applicant from employment.

Yes No Is there a criminal action pending against you?

If yes, please explain with dates and details.

Yes No Conviction of a crime will not necessarily disqualify you from consideration for employment. A crime includes the conviction of a Class A, Class B, Class C, Class D or Class E crime in Maine, or a misdemeanor or felony in another state. Have you ever been convicted of a crime or pled guilty, NOLO, or no contest?

If yes, please explain with dates and details.

Yes No Have you ever been or are you now the subject of any adverse action(s) by any duly authorized or disciplinary agency for either conduct –based or performance based actions?

If yes, please explain with dates and details.

Yes No Will you be willing to take a pre-employment physical?

On what date will you be available for work?_____

Are you able to work: Full Time Part Time Shift Work Temporary

Are you currently on “lay-off” status and subject to recall? Yes No

Can you travel if the job requires it? Yes No

Have you ever been known by any other name?
(Please indicate maiden name and or previous married names)

If yes, please list name(s) and explain._____

EDUCATION

	Name & Address of School	Course of Study	Years Completed	Diploma/Degree
Elementary				
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

LICENSES/CERTIFICATIONS

Professional Licensure

Yes No Are you currently registered, licensed or certified?

Type	State	Number	Date Issued	Expiration Date	Temp/Perm

Yes No Do you have any complaints or annotations pending against your professional license or certificate with a professional board of licensing/certification?

If yes, please explain with dates and details.

Yes No Have you ever had a license or registry suspended or revoked?

If yes, please explain with dates and details

Describe any job relevant training, apprenticeship skills, extra-curricular activities and any job-related training received in the United States Military.

1. _____
Employer Dates Employed From-To Work Performed/Job Title

Address

Telephone Number(s) Starting Pay Final Pay

Reason for Leaving

2. _____
Employer Dates Employed From-To Work Performed/Job Title

Address

Telephone Number(s) Starting Pay Final Pay

Reason for Leaving

3. _____
Employer Dates Employed From-To Work Performed/Job Title

Address

Telephone Number(s) Starting Pay Final Pay

Reason for Leaving

4. _____
Employer Dates Employed From-To Work Performed/Job Title

Address

Telephone Number(s) Starting Pay Final Pay

Reason for Leaving

ADDITIONAL INFORMATION

Summarize special job-related skills and qualifications acquired from employment or other experience.

Note Specialized Skills Below

_____ CRT	_____ Fax	_____ Production/Mobile
_____ PC	_____ Machinery (list)	_____
_____ Calculator	_____ Phone System	_____ ACT
_____ Excel	_____	_____ Outlook
_____ Mechanical Lifts	_____ Word	

Other Technology related equipment: _____

State any additional information you feel may be helpful to Dirigo Pines in considering your application as well as any professional, trade, business or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

Professional References

1. _____
Name Phone Number

_____ Relationship
Title and Company e-mail address

2. _____
Name Phone Number

_____ Relationship
Title and Company e-mail address

3. _____
Name Phone Number

_____ Relationship
Title and Company e-mail address



APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I do hereby authorize all my previous employers or references to furnish any information concerning my personal character, habits or employment records. I hereby release all such persons from liability or damages incurred as a result in inquiry and furnishing this information.

This application for employment shall be considered active for a period of time not to exceed forty-five (45) days (but will be retained for one (1) year) Any applicant wishing to be considered for employment beyond this period of time should inquire as to whether or not applications are being accepted at this time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Dirigo Pines is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Dirigo Pines.

If employed, I agree to abide by Dirigo Pines Inn policies, procedures, rules and regulations, which may be changed from time to time.

I understand there is an introductory period for all employees.

I understand Dirigo Pines Inn promotes a tobacco free environment and prohibits the use of tobacco products on Dirigo Pines grounds.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of Dirigo Pines.

Signature of Applicant

Date