



MID-COAST SOLID WASTE CORPORATION
PO BOX 1016
ROCKPORT, MAINE 04856
(207) 236-2467

JOB APPLICATION

THE MID-COAST SOLID WASTE CORPORATION DOES NOT DISCRIMINATE IN THE APPLICATION OF ITS EMPLOYMENT POLICIES AND WILL HONOR ALL APPROPRIATE LAWS RELATIVE TO DISCRIMINATION



Date: _____

Job title you are applying for: _____

First Name: _____ Last Name: _____

Permanent Address: _____

Phone/Cell Number: _____ Email Address: _____

Do you have a valid driver's license: _____ State Issued: _____

If Yes; which type: ___ Class A ___ Class B ___ Class C

EDUCATION: Starting with high school, list any schools or colleges you may have attended.

School(s) Attended	Address	No. of Yrs.	Graduated/Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

What special skills do you have or licenses and/or certifications do you hold that may be relevant to this position?

EXPERIENCE: Please list the last three jobs you have had starting with the most recent job held. Please account for any gaps in employment during the past five years on the back of page. (OR ATTACH CURRENT RESUME)

From: _____ To: _____ Position: _____ Employer: _____

Employer Phone Number: _____

Duties:

From: _____ To: _____ Position: _____ Employer: _____

Employer Phone Number: _____

Duties:

From: _____ To: _____ Position: _____ Employer: _____

Employer Phone Number: _____

Duties:

REFERENCES: List three, two of whom are most recent supervisors, who can comment on your ability and whom we may contact

Name	Position	Address	Phone
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I authorize Mid-Coast Solid Waste Corporation to check my driving record if the position for which I am applying requires driving. I understand that I may be asked to submit to a pre-employment physical, drug test, a credit history and/or a criminal history background check as a condition of employment.

My signature below constitutes authorization to check my employment history, including without limitation, criminal arrest and conviction record checks, reference checks, and release of investigatory information possessed by any state, local or federal agency. I further authorize those persons, agencies or entities that the Mid-Coast Solid Waste Corporation contacts in connection with my employment application to fully provide the Mid-Coast Solid Waste Corporation any information on the matters set forth above. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation, defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the Mid-Coast Solid Waste Corporation its agents and officials or against any provider of such information.

I understand that information submitted in and with this application may be disclosed to a screening and/or interviewing committee, which may also include other staff and members of the community. I give my consent to this disclosure.

Dated: _____ Signature: _____

NOTE: ALL APPLICATION MATERIALS BECOME THE PROPERTY OF THE MID-COAST SOLID WASTE CORPORATION. NONE WILL BE RETURNED. PROVIDING ANY FALSE OR MISLEADING INFORMATION ON THIS APPLICATION OR IN THE APPLICATION OR EMPLOYMENT SCREENING PROCESS SHALL BE FULLY SUFFICIENT GROUNDS TO REFUSE TO EMPLOY THE APPLICANT OR, IF THE APPLICANT HAS BEEN EMPLOYED, TO IMMEDIATELY DISMISS THE APPLICANT/EMPLOYEE.

NOTE: EMPLOYMENT CANNOT BE FINALIZED UNTIL THE APPLICANT HAS COMPLETED REQUIREMENTS FOR COMPLETE BACKGROUND CHECKS.