



PO Box 120 Kingfield ME 04947 Phone 207.265.2646 Fax 207.265.4054 www.arcenterprisesinc.com

## Application for Employment

APPLICANT INFORMATION			
Name:	Social Security #:		
Address:	Home Telephone:		
Mailing Address:	Daytime Telephone:		
City/State:	Zip Code:		
Have you ever worked for ARC Enterprises before?	If yes, when?		
Do you have any friends or relatives working for ARC Enterprises?	If yes, state name and relationship:		
Are you legally entitled to work in the U.S.?	Are you 18 years of age or older?		
GENERAL INFORMATION ABOUT EMPLOYMENT DESIRED			
Position you are applying for:			
Date of availability:	Hourly rate of pay desired:		
<b>If you are applying for a position that requires driving, please complete this section.</b>			
Do you have a valid driver's license?	<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 60%;">License #:</td> <td style="border: none; width: 40%;">State:</td> </tr> </table>	License #:	State:
License #:	State:		
<p>Note: If you are selected for an interview, you are required to present a copy of your driving record that is not more than four weeks old. After being hired, a copy of this driving record will be placed in your personnel file and an annual update will be required.</p>			

**SKILL & EXPERIENCE**

What machines or equipment have you operated that relate to the position you have applied for?

Are there any skills, experience, or other qualifications that you feel would assist you in performing the duties of the position you have applied for?

**EDUCATION & TRAINING**

High School/Location	Dates Attended/Graduated	Course of Study
Technical School/Location	Dates Attended/Graduated	Course of Study
College/Location	Dates Attended/Graduated	Course of Study
U.S. Military/Location	Dates Served	Course of Study

## EMPLOYMENT HISTORY

List below your last three employers, starting with the most recent.

1)	Name of Company:	Address:
	Name of Supervisor:	Telephone #:
	Position & Duties:	
	Dates of Employment, From:	To:
	Starting Rate of Pay:	Ending Rate of Pay:
	Reason for Leaving:	
2)	Name of Company:	Address:
	Name of Supervisor:	Telephone #:
	Position & Duties:	
	Dates of Employment, From:	To:
	Starting Rate of Pay:	Ending Rate of Pay:
	Reason for Leaving:	
3)	Name of Company:	Address:
	Name of Supervisor:	Telephone #:
	Position & Duties:	
	Dates of Employment- From:	To:
	Starting Rate of Pay:	Ending Rate of Pay:
	Reason for Leaving:	

## REFERENCES

Please list the names of three people who know your school and/or professional abilities that we can contact for more information.

Name & Title		Address	Telephone
1			Home: (____)_____
			Work: (____)_____
2			Home: (____)_____
			Work: (____)_____
3			Home: (____)_____
			Work: (____)_____

Please read and initial each paragraph below (if there is any part of this page you do not understand, please ask the interviewer about it prior to signing).

**INITIALS**

\_\_\_\_\_ I hereby authorize ARC Enterprises to thoroughly investigate my references, work records, education, and other matters related to my suitability for employment and, further, authorize my current and former employers to disclose to the company any and all letters, reports, and other information pertaining to my employment with them, without giving me prior notice of such disclosure. In addition, I hereby release ARC Enterprises my current and former employers, and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation.

\_\_\_\_\_ I understand that if offered employment, the offer may be contingent on my passing a pre-employment physical. By signing this application, I voluntarily agree to submit to a pre-employment physical upon request. I understand that failure to pass the physical will result in withdrawal of the employment offer.

\_\_\_\_\_ I understand that nothing contained in the application or conveyed to me during any interview which may be granted is intended to create an employment contract, implied or explicit, between me and ARC Enterprises. In addition, I understand and agree that if I am employed, my employment relationship with ARC Enterprises is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause or reason, at the opinion of either myself or ARC Enterprises, and that no promises or representations contrary to the foregoing are binding on ARC Enterprises unless made in writing and signed jointly by the President and myself.

\_\_\_\_\_ I understand and agree that any future changes in my title, duties, compensation, working conditions, and/or ARC Enterprises benefits, policies, and procedures will not alter our at-will and arbitration agreements.

\_\_\_\_\_ I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

\_\_\_\_\_ If the position applied for requires driving, I understand that I will be required to possess a current and valid state driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance. I also understand that any offer of employment is contingent on my ability to be covered by ARC Enterprises auto insurance, if required for my position.

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

My signature below certifies that I have read and understand this complete page, and agree to the terms and conditions outlined in this document.

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

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