



2729 US Route 2  
Hermon, Maine 04401  
(207) 848-7007  
Fax (207) 848-0424  
[info@finelinepavementstriping.com](mailto:info@finelinepavementstriping.com)

## **Employment Application**

### **Personal Information:**

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Are you at least 18 years old?

Yes

No

### **Education:**

High School: \_\_\_\_\_

College: \_\_\_\_\_

Trade or Business School: \_\_\_\_\_

Certificates and Trainings: \_\_\_\_\_

Additional Educational Experience: \_\_\_\_\_

---

---

---

---

**Work Experience:**

Are you applying for:

Full Time

Part Time

Seasonal

Are You Currently Employed?

Yes

No

Date Available to Begin Employment: \_\_\_\_\_

Present/Most Recent Employer & Address/Telephone:

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

Date of Employment: \_\_\_\_\_

Position Held: \_\_\_\_\_

Salary: \_\_\_\_\_

Employer & Address/Telephone:

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

Date of Employment: \_\_\_\_\_

Position Held: \_\_\_\_\_

Salary: \_\_\_\_\_

Employer & Address/Telephone:

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

Date of Employment: \_\_\_\_\_

Position Held: \_\_\_\_\_

Salary: \_\_\_\_\_

**General Information:**

Please tell us if there is anything else you would like us to know about you and/or you experience related to this position: \_\_\_\_\_

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

Do you currently hold a valid driver's license?

Yes

No

Drivers License #: \_\_\_\_\_

Issuing State: \_\_\_\_\_

Is your ability to operate and/or register a motor vehicle currently under suspension or has it been under suspension in the past 5 years? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

By signing this application, I attest that everything stated within is true and accurate to the best of my ability. I also understand that as a condition of my employment I may be asked to submit to random drug tests at any point before or within my dates of employment.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

If applicant is a minor, signature of parent/guardian:

\_\_\_\_\_

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

If you have any questions regarding this application please feel free to contact us at (207) 848-7007 and we will be happy to assist you.