



TOWN OF MACHIAS

17 STACKPOLE DR. • P.O. BOX 418

MACHIAS, ME 04654



EMPLOYMENT APPLICATION

The Town of Machias is an Equal Employment Opportunity Employer. We do not discriminate on the basis of race, color, religion, sex, sexual orientation, gender identity, national origin, age, disability, or any other protected class under state or federal law.

Applicants requiring accommodation under the Americans with Disabilities Act (ADA) or Maine Human Rights Act should contact the Human Resources Department at (207) 255-6621 ext. 244 or hr@machiasme.gov.

Pursuant to 26 M.R.S. §628, the Town will not seek or use prior salary history in determining compensation. Employment is at-will unless governed by a collective bargaining agreement or contract.

All employment with the Town of Machias is subject to a background check, the scope of which may vary based on the position. This may include education, employment, criminal history, driving record, or other relevant verifications consistent with law.

Part I – Applicant Information

Position(s) Applied For:	
Department:	
Full Name:	
Address:	
Phone Number(s):	
Email:	

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Confidential – For Statistical Reporting Only

Completion of this section is voluntary and will not affect your application status. This information is used solely for compliance with federal EEOC (EEO-4) and Maine Human Rights Commission reporting requirements.

Gender Identity:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Nonbinary <input type="checkbox"/> Prefer not to say
Ethnicity:	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race (Select all that apply):	<input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Two or More Races <input type="checkbox"/> Other: _____
Veteran Status:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to answer
Disability Status:	<input type="checkbox"/> Yes, I have a disability <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say

Part II – Employment Eligibility

Are you legally authorized to work in the United States? Yes No

Have you ever been employed by the Town of Machias? Yes No

If yes, provide position(s) and dates:

Do you have any relatives employed by the Town of Machias? Yes No

If yes, list name(s) and department(s):

Have you had any traffic violations or accidents in the last three years? Yes No

If yes, please list:

Conviction or Accident: _____ Date: _____

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Conviction or Accident: _____ Date: _____

Conviction or Accident: _____ Date: _____

Conviction or Accident: _____ Date: _____

Have you been convicted of a crime? Yes No

If yes, please give details, including dates, charges, and disposition. Convictions are not an absolute bar to employment. Consideration is given to the offense and its relationship to the position for which you are applying.

Part III – Education and Training

School Name & Location	Years Completed	Degree/Diploma

List professional licenses, certifications, or technical skills relevant to this position:

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Part IV – Employment History (Most Recent First)

Employer #1:

Employer Name and Address:	
Supervisor Name and Title:	
Job Title:	
Employment Dates:	
Duties and Responsibilities:	
Reason for Leaving:	

Employer #2:

Employer Name and Address:	
Supervisor Name and Title:	
Job Title:	
Employment Dates:	
Duties and Responsibilities:	
Reason for Leaving:	

Employer #3:

Employer Name and Address:	
Supervisor Name and Title:	
Job Title:	
Employment Dates:	
Duties and Responsibilities:	
Reason for Leaving:	

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Part V – References

Name	Relationship	Phone Number

Part VI – Certification and Authorization

I certify that all information I have provided in this application is true and complete to the best of my knowledge. I authorize investigation of all statements contained herein and release the Town of Machias from liability for seeking or providing such information. I understand that any false or misleading statements or omissions may result in disqualification or termination of employment.

I understand that, unless otherwise stated in writing, employment with the Town of Machias is at-will, meaning either the employee or the Town may terminate the employment relationship at any time with or without cause or notice.

Signature: _____

Date: _____

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