



3 Dock Square
P.O. Box 818
Kennebunkport, ME 04046
207.967.2775
www.ScalawagsOnline.com

Thank you for your interest in Scalawags.

Please complete the attached employment application and tell us about your availability below. You are welcome to attach a resume and/or any other relevant information.

You may submit your application via:

- 1) In person: drop off at the shop
- 2) Mail: Scalawags, PO Box 818, Kennebunkport, ME 04046
- 3) Email: scalawags@scalawagsonline.com

AVAILABILITY

I am available to start on: _____

I am interested in:

___ year-round employment

OR

___ seasonal and cannot work beyond: _____

SUMMER	FALL
I am available to work: _____ hours per week	I am available to work: _____ hours per week
I am available to work: <ul style="list-style-type: none"> • ___ Monday • ___ Tuesday • ___ Wednesday • ___ Thursday • ___ Friday • ___ Saturday • ___ Sunday 	I am available to work: <ul style="list-style-type: none"> • ___ Monday • ___ Tuesday • ___ Wednesday • ___ Thursday • ___ Friday • ___ Saturday • ___ Sunday
I am available to work: <ul style="list-style-type: none"> • ___ Mornings • ___ Afternoons • ___ Evenings 	I am available to work: <ul style="list-style-type: none"> • ___ Mornings • ___ Afternoons • ___ Evenings

Please include any other notes about your availability and work preferences here:



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Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () E-mail Address:

Date Available: Social Security No.: Desired Salary: \$

Position Applied for:

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO
Have you ever been convicted of a felony? YES NO If yes, explain:

Education

High School: Address: _____
From: To: Did you graduate? YES NO Degree: _____
College: Address: _____
From: To: Did you graduate? YES NO Degree: _____
Other: Address: _____
From: To: Did you graduate? YES NO Degree: _____

Previous Employment

Company: Phone: ()
Address: Supervisor:
Job Title:
Responsibilities:
From: To: Reason for Leaving:
May we contact your previous supervisor for a reference? YES NO

