

## **Town of Livermore Falls**

## **Employment Application**

Applicant Information								
Full Name:					D	ate:		
	Last	First			M.I.			
Address:	Street Address					Apartment/Unit #		
Phone:	City	TIED	Email	2	State	ZIP Code		
Date Available: Social Security No.: Position Applied for:				Desired Salary:				
Are you a cit	tizen of the United States? ver worked for the Town?	YES NO C C YES NO C C YES			authorized to work	YES NO in the U.S.?		
	1 400000	Refe	rences		100	<u>`</u>		
Please list t	hree professional reference		5			1		
Full Name:			1		Relationshi	D:		
Company:	( James )		R L	1	Phone	ə:		
Address:	1. 1			1				
Full Name: Company:			1	k	Relationship	/		
Address:			1		1			
Full Name:						o:		
Address:								
Education								
High School	:	Address						
From:	То:	Did you graduate			Diploma:			
College:		Address	YES	NO				
From:	То:	Did you graduate			Degree:			
Other: From:	То:	Address Did you graduate	YES	NO □	Degree:			

## Previous Employment

Company:		Phone:		
Address:		Supervisor:		
Job Title:	Starting Salary: <u>\$</u> End	nding Salary: <b>\$</b>		
Responsibilities:				
From: To:	Reason for Leaving:			
May we contact your previous supervisor	YES NO r for a reference?			
Company:		Phone:		
Address:		Supervisor:		
Job Title:	Starting Salary: <b>\$</b>	Ending Salary: <b>\$</b>		
Responsibilities:	STER BUILD			
From: To:	Reason for Leaving:			
May we contact your previous supervisor	r for a reference?	A		
Company:		Phone:		
Address:		Supervisor:		
Job Title:	Starting Salary: <b>\$</b>	Ending Salary: <b>\$</b>		
Responsibilities:				
-	Reason for Leaving:			
May we contact your previous supervisor	YES NO			
, ,	Disclaimer and Signature			
I certify that my answe <mark>rs are true</mark> and c	E 17 E.			
		formation in my application or		
interview may result in my release.	t, I understand that false or misleading in	formation in my application or		
Signature:		Date:		
If applying for the Highway Department,	do you have Class A Class B C	DL Other		