

TOWN OF NEW HAVEN APPLICATION FOR EMPLOYMENT

**78 North Street
New Haven, Vermont 05472
802 453 3516
FAX 802 453 7552
www.newhavenvt.com**

Date of Application

Name

Date of Birth

Street Address

Phone Number

Cell Phone Number

Town

State

Zip Code

E-Mail Address

Education – Facility and Level Completed _____

Commercial Driver’s License No. _____

Job History

1. _____

Company

Supervisor

Address

Town

State

Phone Number

Dates of Employment

Hourly Wage

Type of Work Done

2. _____

Company

Supervisor

Address

Town

State

Phone Number

Dates of Employment

Hourly Wage

Type of Work Done

3. _____

| | | | |
|---------------------|-------------|-------------------|--------------|
| Company | Supervisor | | |
| _____ | _____ | _____ | _____ |
| Address | Town | State | Phone Number |
| _____ | _____ | _____ | _____ |
| Dates of Employment | Hourly Wage | Type of Work Done | |
| _____ | _____ | _____ | |

Vehicle Owned Insurance Co. Policy # _____

Reasons for Applying for Employment

Skills Pertinent to Job Description

Additional Comments

Please include 3 references.