



Town of Oromocto
4 Doyle Drive
Oromocto, NB, E2V 2V3
Telephone: (506) 357-4400
Fax: (506) 357-2266

APPLICATION FOR EMPLOYMENT

Personal Information:

Last Name:	Given Name:
Position applied for:	Date available to start work:
Home Phone Number:	Other Phone Number:
HOME MAILING ADDRESS	
Number & Street:	City or Town:
Province:	Postal Code:

Employment Experience:

Name and address of employer:	Position occupied and duties performed:	Reason for leaving:	Beginning Year/Month	Ending Year/Month

Describe any skills, abilities, awards, volunteer experience, etc. that you consider to be related to the position for which you are applying. (Use separate sheet if necessary): _____

Education:

Institution:	Certificate or Diploma or number of credits	Begin Year/Month	Successfully completed Year/Month

Additional Information:

Are you legally entitled to work in Canada? Yes No

English French Other _____

Languages Spoken

Languages Written

Do you have a valid Driver's License? Yes No Class _____

Have you previously been employed by the TOWN OF OROMOCTO? Yes No

If yes, in what capacity? _____

References: Name three (3) persons, who are not relatives, that know you and your capabilities and to whom we may refer in confidence:

Name:	Occupation:	Address	Telephone/Fax

I certify that the foregoing statements are complete and correct to the best of my knowledge and belief and acknowledge that a false declaration may result in dismissal from Town of Oromocto employ:

Signature of application: _____ Date: _____