

**TOWN & VILLAGE
OF LUDLOW, VT**

**APPLICATION
FOR
EMPLOYMENT**

PERSONAL

POSITION APPLIED FOR
NAME _____
Last First Initial

ADDRESS _____
Street City Zip

SOCIAL SECURITY NO. _____

TELEPHONE NO. _____

IN CASE OF EMERGENCY, NOTIFY _____
Name Address Phone

NAME OF SCHOOL	Dates	Attended	GRADE COMPLETED	COURSE OR MAJOR SUBJECT
	From	To		
Grade School				
High School				
Business or Trade School				
College or University				

MISCELLANEOUS TRAINING

OFFICE MACHINES OPERATED
(Fill out if applying for *office* work)

OTHER MACHINES OR EQUIPMENT OPERATED

DESCRIBE ANY OTHER SPECIAL SKILLS WHICH ARE IN ANY WAY RELATED TO THE KIND OF WORK YOU WANT TO DO:

Town & Village of Ludlow is an equal opportunity employer.

WORK EXPERIENCE

1.

Name of PRESENT or LAST employer				Business		Address	
Starting Date		Leaving	Date	Wages	Reason for Leaving	May We Contact?	
Month	Year	Month	Year				
Job Title			Name of Supervisor			Supervisor's Job Title	
Description of Work and Responsibilities:							

2.

Name of NEXT PREVIOUS employer				Business		Address	
Starting Date		Leaving Date		Wages	Reason for Leaving	May We Contact?	
Month	Year	Month	Year				
Job Title			Name of Supervisor			Supervisor's Job Title	
Description of Work and Responsibilities:							

3.

Name of NEXT PREVIOUS employer				Business		Address	
Starting Date		Leaving Date		Wages	Reason for Leaving	May We Contact?	
Month	Year	Month	Year				
Job Title			Name of Supervisor			Supervisor's Job Title	
Description of Work and Responsibilities:							

Branch of Service _____ From _____ To _____
 Type of Discharge _____ Major Duties _____

 Service Schools Attended _____
 Present Military Obligation (Reserves) _____

Personal References (Not former Employers or Relatives)

REFERENCES

Name and Occupation	Address	Phone

If you are applying for a job that may involve driving a municipal vehicle please answer the following:

Do you possess a valid VT Driver's License YES NO License Number _____

Please check License Type: Operator
 CDL

Expiration Date: _____

Signature of Applicant _____

If you wish to provide additional information, please use the space below:

**DO NOT WRITE IN THIS SPACE
FOR INTERVIEWER'S USE**

INTERVIEWER	DATE	COMMENTS

FOR TEST ADMINISTRATOR'S USE

TESTS ADMINISTERED	DATE	RAW SCORE	RATING	COMMENTS AND INTERPRETATIONS

REFERENCE CHECK

	RESULTS OF REFERENCE CHECK