

Application for Employment

Town of Lebanon

579 Exeter Road Lebanon, CT 06249 Phone: (860)642-2011 Fax: (860) 642-7716

Application Date: Position(s) being applied for:

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of non-job related medical condition or handicap, or any other legally protected status.

Name:	Last			First			Middle							
Address:	No.	Street				City				Sta	te	Zip		
					Email									
Contact:	Cell: Other													
Date available for work:			Driver Lic			er Licer	No. State r License:							
Availability:	Full-Ti	me	Part-Time			Temporary								
EDUCATION		Eleme	ntary	High			College/Technical			Graduate/ Professional				
School Name														
Highest Level/Year Completed:		4 5 6	78	9 10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree(s)														
Course of Study:														
Specialize Apprentices Extra-Curric														
Licenses/Certifications (i.e. CDL, etc)														

Additional information that
may be helpful in considering
your application.

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities.

Employer	Dataa	From:	To:			
Employer	Dates	From:	10:			
	Employed					
Address	Work					
	Performed					
Job Title						
Supervisor						
Reason for Leaving						
Employer	Dates	From:	To:			
Employor	Employed		10.			
Address						
Address	Work					
	Performed					
Job Title						
Supervisor						
Reason for Leaving						
Employer	Dates	From:	To:			
	Employed					
Address	Work					
Address	Performed					
	Fenomed					
Job Title						
Supervisor						
Reason for Leaving						
	T		1			
Employer	Dates	From:	To:			
	Employed					
Address	Work					
	Performed					
Job Title	1 ononinou					
Suman inar						
Supervisor						
Dessen for Los ving						
Reason for Leaving						
On a siel abilla and such fractions, a source of fract						
Special skills and qualifications acquired from						
employment or other experience						

List Three Personal or Professional References:								
Name	Title		Contact Number					
Are you a United States citize	en or are you authorized to work in the Unite to work in the Unites States will be required	ed States? (Proof d upon hire)	No					
Answer ONLY if a driver's lice you have a valid Connecticut	ense is REQUIRED FOR THE POSITION Y	OU SEEK. Do Yes	No					
	ATTACH RESU							
	ATTACH RESUL	VIL						
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Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Town of Lebanon.

Signa

ature	Date



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Application for Employment Public Works Department

Complete this page only if you are applying for a role in Public Works.

Name	:			Date:		
Have	you ever worked construction?			Yes	No	
	e check next to all of the following mapperated:	achines that you	Please state length of the machines indicated (mo		ated each of the	
	Backhoe					
	Front end loader					
	Dump truck					
	Chain saw					
	Sickle mower					
	Flail mower					
	Paving machine					
	Roller					
Jet sander						
Snow plow						
Pleas	e list any other equipment and length	of experience you	believe appropriate:			
Can y	ou weld?			Yes	No	
Can y	ou do mechanical work?			Yes	No	
In the course of your work, would you be willing to do the following when needed?						
Labor	er Yes N	No	Sweeping	Yes	No	
Cuttin	g Grass Yes N	٧o				

The Town of Lebanon is an equal opportunity employer and prohibits discrimination in its practices and policies on the basis of sex, race, religion, or national origin.