



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:
<b>HOME MAILING ADDRESS</b>	
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): \_\_\_\_\_

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**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: \_\_\_\_\_