

Town of New Castle New Castle, NH 03854-0367

Employment Application

Applicant Information							
Full Name:						Date:	
	Last	Firs	t		M.I.		
Address:	Street Address					Apartment/Unit #	
	City				State	ZIP Code	
Phone:				Email			
Date Availal	ble:			Desired Salary:			
Position App	olied for:						
	ently have the unrestricted cept employment in the United	YES	NO	Will you now or in the sponsorship in the sponsorsh		for the Town of YES N	10
Have you ev	ver worked for this company?	YES	NO	If yes, when?			
	ver been convicted of a felony been annulled by the Court?	YES	NO				
		_	Ed	ucation			
College:			Addre				
From:	To:	Did you g	raduat	e? 🔲 🗍	Degree:		
Other:			Addre	ss:			
Erom:	To:	Did vou a	raduat	YES NO	Dograo:		

References										
Please list three pro	ofessional references.									
Full Name:		Relationship:								
Camanani		Dhanai								
Address:										
_										
Address:										
_										
		Phone:								
Address:										
	Previous Employm	ent								
Company:		Phone:								
Address:		Supervisor:								
Job Title:	Starting Salary:	Ending Salary:\$								
Responsibilities: _										
From:	To: Reason	for Leaving:								
May we contact you	YES ur previous employer for a reference?	NO								
may we contact you	an provious employer for a reference.									
0		Dhama								
Company:Address:		0								
Address.		Supervisor:								
Job Title:	Starting Salary:	Ending Salary:\$								
Responsibilities: _										
From:	To: Reason	for Leaving:								
	YES	NO								
May we contact you	ur previous employer for a reference?									
Company:		Phone:								
Address:		Supervisor:								
Job Title:	Starting Salary:\$	Ending Salary:\$								

Responsibilities:									
From: To:	Reason fo	Reason for Leaving:							
May we contact your previous employer for a reference?	YES	NO							
Military Service									
Branch:		From:	To:						
Rank at Discharge:	_ Type of I	Discharge:							
Disclaimer and Signature									
I understand that any false answer, statement or omissions made by me on this application or any other required document will be considered sufficient cause for denial of employment or termination of employment. I hereby give the Town of New Castle the right to make a thorough investigation of my past employment, education and activities. Also I release the Town of New Castle and all persons, companies and corporations from all liability of providing such information. In consideration of my employment, I agree that, if hired, I will conform to the rules and regulations of the Town of New Castle.									
Signature:			Date:						

Equal Employment Opportunity

The Town of New Castle is committed to a policy of equal employment opportunity and does not discriminate in the terms, conditions, or privileges of employment on account of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or otherwise as may be prohibited by federal and state law.

C:\Users\lori.ruest\Desktop\Accountant\Human Resources\Employment Application 04 2022 New Castle FINAL.docx