

# APPLICATION FOR APPOINTMENTS

## TOWN OF BATAVIA

3833 West Main Street Road

Batavia, New York 14020

Phone: (585) 343-1729

Fax: (585) 343-8461

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

POSITION FOR WHICH YOU ARE APPLYING: \_\_\_\_\_

EDUCATION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

EXPERIENCE (Attach resume if needed) \_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### OTHER QUALIFICATIONS OR INTERESTS PERTINENT TO THIS POSITION

(A brief letter can be attached if needed)

\_\_\_\_\_

\_\_\_\_\_

### REFERENCES

1. \_\_\_\_\_ PHONE: \_\_\_\_\_

2. \_\_\_\_\_ PHONE: \_\_\_\_\_

3. \_\_\_\_\_ PHONE: \_\_\_\_\_