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 YO | J ARE APPLYING: | |
| EDUCATION: | | |
| | | |
| EXPERIENCE (Attach resume | if needed) | |
| | | |
| OTHER QUALICATIONS OF (A brief letter can be attached if | R INTERESTS PERTINENT TO THIS POSITION needed) | |
| REFERENCES | | |
| 1 | PHONE: | |
| 2 | PHONE: | |
| 3 | PHONE: | |