

## Town of Aguilar 101 W. Main Street

101 W. Main Street PO Box 538 Aguilar, CO 81020 Ph: 719-941-4360 Fax: 719-941-4395

**Donald Gonzales**Mayor

## **Employment Application**

	4 (A)		Api	licant Ir	form	ation				
Full Name:							Date:			
	Last		Firs	t			M.I.			
Address:					•	* 10000	www.	A		
	Street Address							Apartment/Unit #	r	
	City						State	ZIP Code		
Phone:	-			E	mail			- MANAGARAN		
Date of Birth	h:	Social	Securit	y No.:			Desired	Salary:\$		
Position App	plied for:			·			-0.			
Date Availa	ble:		VEO	NO				VEC	NO	
Are you a c	itizen of the United Stat	tes?	YES	NO	If no, a	are you	authorized to wo	YES rk in the U.S.?	NO	
Have you e	ver worked for this com	ipany?	YES	NO	If yes,	when?_		tento del monto		
Have you e	ver been convicted of a	a felony?	YES	NO						
If yes, expla	ain:									
				Educ	ation					
High Schoo	ol:	***********		Address:_				11.00.000		
From:	To:	Di	d you g	raduate?	YES	NO	Diploma:			
College:				Address:_			-		<del></del>	
From:	To:	Di	d you g	ıraduate?	YES	NO	Degree:			
Other:			<u>.</u>	Address:						
From:	To:	Di	d you g	raduate?	YES	NO	Degree:			

4.74	Refer	ences			
Please list three pro	fessional references.				
Full Name:				Relationship:	
Company:	ALLANDA TO THE STATE OF THE STA	·····		Phone:	
Address:					
				Relationship:	
0				Phone:	
Address:					
Full Name:				Relationship:	
Componit				Phone:	
A -l -l					
	Previous E	im ployme	ent		
Company:				Phone:	
A 11				Supervisor:	
	Starting S		Ending Salary:\$		
	· ·				
From:	To:				
•	previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Addross:				Supervisor:	
Job Title:	Starting S	Salary:\$			
	To:				
		YES	NO		
May we contact your	previous supervisor for a reference?				
Company:				Phone:	
· · · · · ·				Supervisor:	
Job Title:	Starting S			Ending Salary:\$	

Responsibilities:					
From:	To:	Reason fo	or Leaving:		
May we contact you	r previous supervisor for a reference?	YES	NO		
Special Skill (He	avy equipment knowledge and	operating	, computer skill	s, efc.)	
			Parameter II		
Application of the state of the		100000000			
Military Service				<b>.</b>	
Branch:			From:	To:	
Rank at Discharge:		Type of	Discharge:		
If other than honora	ble, explain:		WATE		
e de la companya de	Disclaimer a	and Signa	iure		
I certify that my an	swers are true and complete to the be	est of my kn	owledge.		
If this application le interview may resu	eads to employment, I understand tha It in my release.	t false or m	isleading informati	on in my application	or
Signature:			D	ate:	