

TOWN OF CANTON

STREET DEPARTMENT SUMMER EMPLOYMENT

NAME: _____ AGE: _____ BIRTH DATE: _____ SEX: _____

SOCIAL SECURITY: _____ TELEPHONE _____

PARENTS NAME: _____

ADDRESS: _____

EDUCATION: SCHOOL YRS. ATTENDED YEAR GRAD.

HIGH SCHOOL: _____

COLLEGE: _____

OTHER: _____

PREVIOUS EMPLOYMENT:

EMPLOYER	DATE	JOB DESCRIPTION
_____	_____	_____
_____	_____	_____

REFERENCES:

NAME	ADDRESS	OCCUPATION
_____	_____	_____
_____	_____	_____

DATE SUBMITTED: _____

DATE AVAILABLE: _____

SIGNATURE: _____

MUST BE TURNED IN TO CANTON TOWN HALL NO LATER THAN APRIL 15, 2015. NO EXCEPTIONS

SUCCESSFUL APPLICANTS WILL BE NOTIFIED BY MAY 15, 2015.