

Are you suffering from illness or allergy? If yes, give details

Have you ever been convicted of any crime? If yes, give details

If married: Date of marriage..... Dependents.....

Age of dependents.....

Do you plan to engage in other work while employed by B.T.L.

Whom shall we contact in case of emergency?

Name.....Home Telephone.....Business Telephone.....

Home Address.....Business Address.....

List three personal references of good standards other than relatives. Teachers, principals or former employees, who can vouch for your character.

NAME	ADDRESS	TEL. NO	YEARS KNOWN	OCCUPATION
1.....				
2.....				
3.....				

Present employmentSalary.....Position.....

Why do you wish to resign?

Languages you speak, read or write:

Account for all employment since leaving High School (List last position first).

Names & Address of former Employer:	From Mth./Yr.	To Mth/Yr.	Monthly Salary	Reasons for Leaving

Additional Information (e.g. membership in Organizations, additional training, etc.)

I hereby declare that the information on this application is true and complete and that I have not withheld any information which would adversely my application. I understand that I will be subject disqualification or immediate dismissal if this statement is untrue.

Signature

Date