

# TWIN RIVERS CAREER AND TECHNICAL EDUCATION AREA EMPLOYMENT APPLICATION

(Please print or type)

Name \_\_\_\_\_ (\_\_\_\_\_)  
Last First Middle (Maiden)

Address \_\_\_\_\_  
Street

\_\_\_\_\_ City State Zip e-mail

Phone \_\_\_\_\_ FAX \_\_\_\_\_ Position Applying for \_\_\_\_\_

### EDUCATION:

	Name of school	Location	Dates of Attendance	Degree
High School				
College				

### WORK EXPERIENCE: (List most current first)

Job Title	Firm/Business	Location	Dates Employed

### REFERENCES:

Name	Address	Position	Telephone

Return entire application and resume to:

I certify the above information is correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Twin Rivers CTE Area  
P. O. Box 1266  
Vincennes, IN 47591  
812/888-7031; FAX 882-0802  
Email: [bsmall@twinriversarea.org](mailto:bsmall@twinriversarea.org)

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