

APPLICATION FOR TRANSFER/PROMOTION

NAME: _____

ADDRESS: _____

EMAIL ADDRESS: _____

CURRENT POSITION: _____ DEPT. _____

DATE OF EMPLOYMENT IN CURRENT POSITION: _____

TRANSFER TO: _____

EDUCATION:

Type Of School	Name & Location	Course Of Study	# Of Years	Degree Received	Dates Attended

WORK EXPERIENCE:

Position(s) Held

Job Duties

*If you need more space, please use the back of the form or submit a supplemental page.

Do any of your relatives work for the City of Meriden?
If yes please name:

Yes _____ No _____

Name of Relative	Relationship

Do you reside with anyone working for the City of Meriden?
If yes please name:

Yes _____ No _____

Name	Relationship

DATE: _____

Signature of Applicant