



453 Park Street
Fulton, NY 13069-2999
315-592-2009

APPLICATION FOR EMPLOYMENT

Federal and state laws prohibit discrimination in employment because of sex, age, race, color, religious creed, marital status, national origin, ancestry, disability or handicap.

Date of Application _____/_____/_____

Name _____
Last First Middle Initial

Address _____
Street City State Zip Code

Telephone () _____ Social Security # _____

If under 18 years of age, do you have a work permit? ____ Yes ____ No

If not a U.S. citizen, do you have the legal right to remain permanently and work in the U.S.? ____ Yes ____ No

Alien Reg. # _____

Have you reviewed the job description of the position for which you are applying? ____ No ____ Yes If yes, is there any essential function of the job that you could not perform, with or without a reasonable accommodation?

Have you ever pled guilty or been convicted of a criminal offense (not including traffic violations)? ____ Yes ____ No

If yes, please explain. _____

Position applied for _____ Part-time ____ Full-time

Are you able to meet the attendance requirements of the position? ____ Yes ____ No

Shift you can work: ____ Day ____ Evening ____ Night Date you can start: _____

Have you ever applied to this company before? ____ No ____ Yes When: _____

Have you ever been employed by this company before? ____ No ____ Yes When: _____

If so, under what name _____

Supervisor _____ Reason for Leaving _____

EDUCATION

Name and Location	Years Completed	Did You Graduate	Major	Degree	Course of Study
High School					
College					
Other					

REFERENCES: List below the names of three (3) persons not related to you:

Name	Address	Telephone	Years Known
		()	

EMPLOYMENT HISTORY

Provide the following information, starting with your present or most recent employment

From	To	Employer	Tel. # ()
Job Title		Address	
Supervisor: Title:		Reason for Leaving:	
Summarize nature of work performed and job responsibilities: _____			

From	To	Employer	Tel. # ()
Job Title		Address	
Supervisor: Title:		Reason for Leaving:	
Summarize nature of work performed and job responsibilities: _____			

From	To	Employer	Tel. # ()
Job Title		Address	
Supervisor: Title:		Reason for Leaving:	
Summarize nature of work performed and job responsibilities: _____			

May we contact your present employer at this time? ___Yes ___No

The above information is complete and true to the best of my knowledge. I understand that discovery of misrepresentation or omission of facts herein will be cause for immediate dismissal. I give the employer the right to contact and obtain information from all references, employers, and education institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information. I understand that any employment by this facility will be on a 90-day probationary basis. I understand that nothing in this application is to be considered a contract of employment, or a limitation on the Facility's right to terminate my employment at any time after I am hired.

My signature below indicates that I have read this paragraph and understand what it says.

Applicant's Signature

Date