

TOWN OF JOHNSBURG

219 Main Street
North Creek, NY 12853
518-251-2421



Employment Application

This institution is an equal opportunity provider and employer

APPLICANT INFORMATION			
Last Name		First	M.I. Date
Street Address			Apartment/Unit #
City		State	ZIP
Phone		E-mail Address	
Date Available		Social Security No.	
Position Applied for			
Are you a citizen of the United States?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for or applied to this company?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of any crime (felony or misdemeanor)?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain
Are you currently employed?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, where?
Driver's License or State ID Number:		Issued:	Expires:
An MVR will be obtained for all persons required to operate a company vehicle			

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Training		Address	
From	To	Certificate? YES <input type="checkbox"/> NO <input type="checkbox"/>	

REFERENCES	
<i>Please list three references.</i>	
Full Name	Relationship
Address	Phone ()
Full Name	Relationship
Address	Phone ()
Full Name	Relationship
Address	Phone ()

PREVIOUS EMPLOYMENT

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

Please use this space to provide any additional information as necessary. You may include subjects of special study, skills or activities:

DISCLAIMER AND SIGNATURE

I affirm that the statements made by me on this application is true under penalties of perjury, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

Signature _____ Date _____

*****OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE*****

Interviewed by: _____ Date: _____

Remarks: _____

Hired? Yes No Position _____ Department _____ Salary _____