

TOWN OF OSSINING

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Date:

LAST NAME FIRST MIDDLE

HOME NUMBER

STREET ADDRESS

BUSINESS NUMBER

CITY STATE ZIP CODE

CELL PHONE NUMBER

Have you ever applied for employment with us? [] Yes [] No

If yes: Month and Year: _____

Position Desired _____

Are you available for full-time work? [] Yes [] No

Days/Hours available, if part time _____

Are you legally eligible for employment in the United States? (Proof of lawful employment eligibility in the United States will be required upon employment in accordance with the Immigration Reform and Control Act of 1986.) [] Yes [] No

Other skills, qualifications, or experiences (language, computers) relevant to the position for which you are applying? _____

Are you related to anyone currently working for the Town of Ossining? _____

Are there any pending arrests against you? [] Yes [] No

If yes, please explain: _____

EDUCATION (List all educational institutions attended.)

Table with 6 columns: School, Name & Location, Course of Study, No. of Years Completed, Did You Graduate?, Degree or Diploma. Rows include COLLEGE, HIGH SCHOOL, and OTHER.

TOWN OF OSSINING

EMPLOYMENT HISTORY *(Please begin with present or most recent employer.)*

I. Name of Employer _____
Address _____
Telephone _____
Employed from _____ to _____ Supervisor _____
Job title and description of work _____
Reason for leaving _____

II. Name of Employer _____
Address _____
Telephone _____
Employed from _____ to _____ Supervisor _____
Job title and description of work _____
Reason for leaving _____

III. Name of Employer _____
Address _____
Telephone _____
Employed from _____ to _____ Supervisor _____
Job title and description of work _____
Reason for leaving _____

We may contact the employers listed above unless you indicate those you do not want us to contact.

DO NOT CONTACT:

Employer(s) _____
Reason(s) _____

TOWN OF OSSINING

REFERENCES

List 3 references from current and previous employment.

	Name	Address	Telephone Number
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

BACKGROUND

1. Have you ever been released, discharged or asked to resign from any prior employment? Yes No
If yes, please give details: _____

2. Have you ever been the subject of disciplinary charges and/or have you ever been subject to disciplinary action by a prior or current employer? Yes No
If yes, please give details: _____

3. Have you ever served in the United States Armed Forces? (A dishonorable discharge is not an automatic bar to employment and other factors will affect the final decision) Yes No
If yes, please describe your service, including dates of service: _____

TOWN OF OSSINING

I hereby certify that the information provided in this Application For Employment is true, correct and complete. Any misstatement or omission of fact on this Application may result in the rejection of my Application or in my termination, if employed by the Town of Ossining.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the Town of Ossining to continue to employ me in the future.

I authorize the Town of Ossining to contact any educational institutions, former employers, or other individuals and entities having information concerning me to make inquiries and obtain information, including personnel files, relevant to my background, performance and abilities as an employee or relating to my application for employment. I hereby release all such entities and individuals from any and all claims, including but not limited to claims of defamation, associated with the release or disclosure of such information to the Town of Ossining.

I agree that a copy of this authorization and release may be accepted with the same authority as the original.

DATE

SIGNATURE

The Town of Ossining is an equal opportunity employment employer. Prospective employees will receive consideration without discrimination based on race, creed, color, sex, sexual orientation, age, national origin, religion, disability, marital status, pregnancy, citizenship, veteran status, genetic predisposition or carrier status, or membership in any other class protected by law