## **VILLAGE OF SPECULATOR - APPLICATION FOR EMPLOYMENT**

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Position(s) Applied For: Date of Application					
How did you learn abou Advertisement Em	t us? ployment Agency Frienc	l Relative Walk-In	Other		
Last Name	ast Name First Name			Middle Initial	
Address					
Number	Street	City	State Zip	Code	
Phone Number	Cell Phon	ne	SSN		
Email			_		
Have you ever filed an a	pplication with us before?	If Yes, give date			
Have you ever been employed with us before?			If Yes, give date		
Are you currently emplo	oyed?				
May we contact your pro	esent employer?				
	lawfully becoming employed nship or immigration status wi				
On what date would you	be available for work?				
Are you available to wor	rk:Full-timePart Tim	neTemporary			
Are you currently on "la	ny-off" status and subject to r	ecall?			
Have you been convicted	d of a felony within the last 7 y	years? If Yes,	please explain:		
Conviction will not neces	ssarily disqualify an applicant j	from employment.		-	
EDUCATION					
	NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DIPLOMA/ DEGREE	
Elementary / High					
Undergraduate					
Graduate					
Other (Specify)					
DESCRIBE ANY SPEC	IALIZED TRAINING, APPE	RENTICESHIP, SKILLS A	ND EXTRA-CURRICULAR	R ACTIVITIES.	
EMPLOYMENT E	XPERIENCE – Please lis	t most current employer fir	st.		
EMPLOYER		DATES E	MPLOYED		
ADDRESS	WORK PERFORMED				
PHONE NUMBER	JOB 7	TITLE	_ HOURLY RATE/SALARY	Y	
SUPERVISOR	REASON FOR LEAVING				

ADDRESS WORK PERFORMED  PHONE NUMBER JOB TITLE HOURLY RATESALARY  SUPERVISOR REASON FOR LEAVING  EMPLOYER DATES EMPLOYED  ADDRESS WORK PERFORMED  PHONE NUMBER JOB TITLE HOURLY RATESALARY  SUPERVISOR REASON FOR LEAVING  IF YOU NEED ADDITIONAL SPACE, PLEASE CONTINUE ON A SEPARATE SHEET OF PAPER.  OTHER QUALIFICATIONS  SUMMARIZE SPECIAL JOB-RELATED SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCE OR ADDITIONAL INFORMATION YOU FEEL MAY BE HELPFUL TO US IN CONSIDERING YOUR APPLICATION.  REFERENCES  1. Name Phone #  Address  3. Name Phone #  Address  3. Name Phone #  Address  1. Lertify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statement on the superior of the contained in this application for employment as may be necessary in arriving at an employment decision. This application from phone and the considered active for a period of time not to exceed \$5 days. Any any employment relationship with the Employee at any time with or without cause. It is further understood that this "at will" employment relationship will be Employee at any time with or without cause. It is further understood that this "at will" employment relationship will be Employee at any time with or without cause. It is further understood that this "at will" employment relationship will be Employee at any time with or without cause. It is further understood that this "at will" employment relationship will be fungled by any reliter document or be conduct unless such change is specifically acknowledged in writing by an authorize executive of this organization.  In the event of employment, I understand that false or misleading information given in my application in interview may reas in discharge. I understand, also, that I am required to abide by all rules and regulations of the employeer.  Signature of Applicant  Date  FEOR PERSONNEL DEPARTMENT USE ONLY.  AREANARE. YES NO IF YES - INTERVIEW DATE & TIME:  AREANARE NUMBER OF A TIME STATES AND THE ACCUSATION.	EMPLOYER	DATES EMPLOYED				
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