

EMPLOYMENT EXPERIENCE

List all permanent employment since High School. List any summer, part-time, temporary employment which includes experience that tends to qualify you for the position sought. If additional space is required, use supplemental sheets. Start with your most recent or current position.

1.

Company Name _____

Type of Business _____

Address _____

Your Position Title _____

Supervisor's Name _____

and Title _____

Employed From (date) _____ To (date) _____

Salary - Starting _____ Final _____ Hours/Week _____

Describe your duties and responsibilities in detail _____

Reason for leaving (Please explain fully.) _____

2.

Company Name _____

Type of Business _____

Address _____

Your Position Title _____

Supervisor's Name _____

and Title _____

Employed From (date) _____ To (date) _____

Salary - Starting _____ Final _____ Hours/Week _____

Describe your duties and responsibilities in detail _____

Reason for leaving (Please explain fully.) _____

3.

Company Name _____

Type of Business _____

Address _____

Your Position Title _____

Supervisor's Name _____

and Title _____

Employed From (date) _____ To (date) _____

Salary - Starting _____ Final _____ Hours/Week _____

Describe your duties and responsibilities in detail _____

Reason for leaving (Please explain fully.) _____

4.

Company Name _____

Type of Business _____

Address _____

Your Position Title _____

Supervisor's Name _____

and Title _____

Employed From (date) _____ To (date) _____

Salary - Starting _____ Final _____ Hours/Week _____

Describe your duties and responsibilities in detail _____

Reason for leaving (Please explain fully.) _____

PERSONAL DATA

Do you have the legal right to accept employment in the United States? Yes No
(Non-citizens will be required to produce 1-151 or 1-551 alien registration cards at time of appointment)

Have you ever been convicted of a misdemeanor or felony? Yes No
If yes please give particulars and disposition of each charge on a separate sheet and attach same.

If a motor vehicle license is required for the position for which you are applying, please indicate the license you presently possess:

Class	A	B	C	D	E	(select one)	Designate type of commercial license	_____	
							Date of Expiration	____/____/____	
							month	day	year

If a license, certificate or other authorization to practice a trade or profession is a requirement for the position for which you are applying, please indicate the following:

Name of Trade or Profession _____
License Number _____ Date From _____ To _____
Licensing Agency _____ City/State _____

For reference purposes do you have any objections to our contacting present or past employers? Yes No
If yes, Comment _____

Did you qualify as an Exempt Volunteer Fireman as set forth by the criteria in section 200 of the General Municipal Law? Yes No

Did you serve in the armed forces of the United States? Yes No
Branch _____ Dates _____

Did you receive a discharge which was honorable or were you released under honorable circumstances? Yes No

What made you aware of this vacancy or Broome County employment opportunities?
Personal Reference TV Radio Newspaper
Bulletin Board In the Personnel Office Other _____

DECLARATION I agree, if employed, to abide by all the rules and regulations relative to my position. I agree to undergo a physical examination and authorize the examining physician to render to the Department of Personnel the results of the examination. I declare that the statements made in this application (including statements made in any accompanying papers) have been examined by me and to the best of my knowledge and belief, are true and correct. I understand that any omission, misrepresentation and/or falsification of information contained in this application may constitute grounds for my dismissal. I give the employer the right to investigate all references and to secure additional job related information about me. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

Signature _____ Date _____

Please print any other surnames (last names) by which you are or have been known.

The Immigration Reform and Control Act of 1986, requires that all individuals must provide acceptable documentation that proves identity and employment eligibility. A listing of acceptable documents can be obtained from the Department of Personnel. Failure to provide this documentation will affect your chances for employment with Broome County.