

Print or type neatly
using blue or black ink

East Greenbush Department for Community and Recreation
Application for Employment

Date of Application: _____ / _____ / _____

Date of Birth: _____ Last Name: _____ First Name: _____ Soc. Sec. Number: _____ - _____ - _____

This application for employment must be made out and signed personally, by the applicant. EACH QUESTION MUST BE FULLY ANSWERED, INCLUDING ALL INFORMATION ON THE BACK OF THIS FORM. If the answer to a question is 'no' or 'none' please indicate, as it will not affect your possibility for employment.

Address: _____ Home Phone No.: _____
House or Apt. No. and Street City/Town Zip Code

Emergency contact information: _____
Last Name First Name Address Phone No. Relationship

Have you ever been convicted of a felony: Yes No If yes, please explain: _____ Have you ever worked for the Town of E.G.: Yes No

What position did you hold? _____ What was your immediate supervisor's name? _____ What year did you start? _____ Position desired: Director/Asst Director Office Help Counselor Anything Lifeguard

Other positions you may be qualified for: _____ Date available to start working: _____ / _____ / _____ What interested you in working for the Town? _____

List names of relatives employed by the Town of E.G.: _____ Please indicate highest education completed: (by June 2011) High School: 1 2 3 4 College: 1 2 3 4 Name of High School: _____

Location: _____ Anticipated graduation date: _____ Degree obtained: _____ Name of College/University: _____
(High School) (High School) (High School)

Location: _____ Anticipated graduation date: _____ Degree obtained: _____ Have you received any awards: _____
(College) (College) (College) (High School or College)

Please list information in all areas that apply:
Clubs and organizations: _____ Hobbies and areas of special interest: _____ Sports and extracurricular activities: _____ Volunteer/community service work: _____

I have never worked before

Employment History

Dates: Mo. Year	1. Starting pay rate 2. Pay rate upon leaving	1. Name of business 2. Address of employer	1. Department 2. Name of direct supervisor	Describe responsibilities	Reason for leaving	Telephone No.
From:	1. \$	1.	1.			
To:	2. \$	2.	2.			
From:	1. \$	1.	1.			
To:	2. \$	2.	2.			
From:	1. \$	1.	1.			
To:	2. \$	2.	2.			

References: Name three citizens, NOT RELATIVES, who have known you for at least two years. YOU MUST INCLUDE ALL CONTACT INFORMATION. This is especially important if you have never worked before.

Name:	Complete Address:	Telephone Number	Years you have known this person

Vacation / Time Off Request: (Please read & list below)

List availability including: start and end dates, mid season conflicts, and vacations. The Town of East Greenbush has a six week summer program. If you cannot be available for the FULL SIX WEEKS, please inform us as soon as possible as it may affect your job placement.

I attest, under penalty of perjury, that to the best of my knowledge the information provided is true and correct.

Applicants

Signature: X

Date: / /

New applicants only: Please attach copies of the following to this application: Working Papers (16 & 17 year-olds), Birth Certificate, Driver's License, School I.D., or Sheriff's I.D.

Mail completed application to:

Town of East Greenbush
225 Columbia Tpke., Renss., N.Y. 12144
Attention: Community and Recreation Department

All applications must be received by March 31st

Office Use Only
Date received: / /