

ROBINSON TERRACE

28652 State Highway 23
Stamford, NY 12167

APPLICATION FOR EMPLOYMENT

Please Print

Federal and New York State law prohibits discrimination in employment because of sex, race, creed, sexual orientation, disability or national origin.

Date: _____

Name: _____ Social Security No. _____
Last First Middle Initial

Present Address: _____
No. Street City State Zip

How many years have you lived at this address? _____ Telephone No. () _____

Job(s) applied for: 1. _____ Rate of Pay Expected \$ per _____
2. _____ Rate of Pay Expected \$ per _____

How did you learn of this opening? _____

Are you looking for Full-Time, Part-Time or Per Diem? _____

Specify days and hours if Per Diem: _____

Have you worked for us before? _____ If yes, when? _____

List any friends or relatives who work for us (other than spouse): _____

Date available to start work? _____

Are there any other experiences, skills, or qualifications that you feel would especially fit you for work with this facility? _____

Do you know of any difficulties that could interfere with your ability to report to work as scheduled? _____

Education:

TYPE OF SCHOOL	NAME & ADDRESS	YEARS ATTENDED	GRADUATED (YES OR NO)	COURSE OR MAJOR
GRAMMAR OR GRADE				
HIGH SCHOOL				
COLLEGE				
POST GRADUATE				
BUSINESS OR TRADE				
OTHER				

Military Service Record:

Have you ever served in the armed forces? Yes _____ No _____ If Yes, what branch? _____

Dates of duty: From _____ to _____
Month Day Year Month Day Year

Rank at Discharge: _____

What were your duties in the Services (include special training and duty station)? _____

Have you had any schooling under the G.I. Bill of Rights? If yes, describe. _____

Professional References

Name	Address	Phone Number
1.		
2.		
3.		

Personal References (Excluding Former Employers or Relatives)

Name	Address	Phone Number
1.		
2.		
3.		

List Name, Address, and Phone Number of Previous Employers with Most Recent Employer First.	FROM	TO	IMMEDIATE SUPERVISOR	LAST SALARY Hourly, Monthly Or Yearly
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JOB TITLE: _____ / _____ / _____ / _____ / _____

EMPLOYER NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

DUTIES: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS COMPANY/INDIVIDUAL? YES _____ NO _____

JOB TITLE: _____ / _____ / _____ / _____ / _____

EMPLOYER NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

DUTIES: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS COMPANY/INDIVIDUAL? YES _____ NO _____

JOB TITLE: _____ / _____ / _____ / _____ / _____

EMPLOYER NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

DUTIES: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS COMPANY/INDIVIDUAL? YES _____ NO _____

JOB TITLE: _____ / _____ / _____ / _____ / _____

EMPLOYER NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

DUTIES: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS COMPANY/INDIVIDUAL? YES _____ NO _____

APPLICANT'S AUTHORIZATION: _____

Occasionally the form of an application blank makes it difficult for an individual to adequately summarize his/her complete background. To assist us in finding the proper position for you in our company, use the space below to summarize any additional information necessary to describe your full qualifications.

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with this company will be based only on your merit and on no other considerations.

**PLEASE READ CAREFULLY
APPLICANT'S CERTIFICATION AND AGREEMENT**

- The information provided in this application for employment is true, correct and complete to the best of my knowledge.
- I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.
- I authorize investigation of all statements contained this application for employment as may be necessary in arriving at an employment decision.
- In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.
- I also understand that, if hired, I am required to abide by all rules and policies of the facility.

Signature

Date

OFFICIAL USE - DO NOT WRITE BELOW THIS LINE

INTERVIEW: YES NO DATE: _____ HOUR: _____

Result of Interview: _____

Acceptable for Employment? _____ Starting Rate: _____ Starting Date: _____ Shift: _____

Job Title: _____ Dept: _____

Interviewed by: _____ Employed by: _____