



Village of Greenport

236 Third Street, Greenport, New York, 11944

Tel: (631) 477-0248 Fax: (631) 477-1877

www.villageofgreenport.org

JOB APPLICATION FORM

APPLICANT INFORMATION

Instructions: Print clearly in blue or black ink. Answer all questions.

First Name Middle Name Last Name Social Security Number

Mailing Address City, Town, Village State Zip

Phone Number E-Mail Address

Are you under age 18? [] Yes [] No **If yes, do you have an employment certificate?** [] Yes [] No

Have you been convicted of, or pleaded no contest to, a felony within the last five years? [] Yes [] No

If yes, please explain: _____

Do you have a driver's license? [] Yes [] No

License number: _____ **Expiration date:** _____ **State of Issue:** _____

Class: _____ [] Operator [] Commercial [] Chauffeur

Have you had any moving violations during the past three years? [] Yes [] No

If yes, How many? _____

Have you had any accidents during the past three years? [] Yes [] No

If yes, How many? _____

Have you ever been in the Armed Forces? [] Yes [] No **If yes, which branch?** _____

Are you now a member of the National Guard? [] Yes [] No

If yes:

Specialty: _____ **Date Entered:** _____ **Discharge Date:** _____

Position Applied For: _____ **Date Available:** _____/_____/_____

Employment Desired: [] Full-Time Only [] Part-Time Only [] Full-or Part-Time

How many hours can you work weekly? _____

EDUCATION

List High School, College, Business or Trade School, Professional School, etc.

School Name	Location	Dates	Degree/Diploma	Graduation Date

SKILLS

List Skills, Qualifications, Licenses, Training, Awards, etc.:

Typing: Yes No WPM: _____ Word Processing: Yes No WPM: _____

Personal Computer Yes No If yes, PC Mac Both

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

Name of Trade or Professional License: _____

Granting Agency: _____

Granting Agency Address/Location: _____

Date License issued: ____/____/____ Date License expires: ____/____/____

EMPLOYMENT HISTORY

List most current first.

Dates of Employment (Month/Year): From: _____/_____/_____ **To:** _____/_____/_____

Name of Employer _____

Employer Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Work Phone: (_____) _____ - _____

Supervisor: _____ **E-Mail Address:** _____

Job Title or Position: _____ [] Full-Time [] Part-Time [] Volunteer [] Internship [] Temp

Reason For Leaving: _____

May we contact the above named? [] Yes [] No

Dates of Employment (Month/Year): From: _____/_____/_____ **To:** _____/_____/_____

Name of Employer _____

Employer Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Work Phone: (_____) _____ - _____

Supervisor: _____ **E-Mail Address:** _____

Job Title or Position: _____ [] Full-Time [] Part-Time [] Volunteer [] Internship [] Temp

Reason For Leaving: _____

May we contact the above named? [] Yes [] No

Dates of Employment (Month/Year): From: _____/_____/_____ **To:** _____/_____/_____

Name of Employer _____

Employer Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Work Phone: (_____) _____ - _____

Supervisor: _____ **E-Mail Address:** _____

Job Title or Position: _____ [] Full-Time [] Part-Time [] Volunteer [] Internship [] Temp

Reason For Leaving: _____

May we contact the above named? [] Yes [] No

REFERENCES

Please list three references.

First Name	Last Name	Relationship to Applicant
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Mailing Address	City, Town, Village	State	Zip
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Phone Number	E-Mail Address
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First Name	Last Name	Relationship to Applicant
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Mailing Address	City, Town, Village	State	Zip
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Phone Number	E-Mail Address
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First Name	Last Name	Relationship to Applicant
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Mailing Address	City, Town, Village	State	Zip
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Phone Number	E-Mail Address
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APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with The Village of Greenport is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient to cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, The Village of Greenport, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding The Village of Greenport, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that The Village of Greenport does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local State or Federal law.

I also understand that if I am hired, I will be required to provide of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Name of Applicant: _____

Signature of Applicant: _____

Date: ____/____/____

