

TOWN OF GREENBURGH APPLICATION FOR EMPLOYMENT

Instructions: Complete both sides of this application, sign it, and return it to:

Greenburgh 'DUf_g/ 'F WYUjcb, %%C`na dJW@'Z5 fXg`Ym, NY 10) &&

Additional Information may be written on a separate sheet of paper and attached to this application

LAST NAME	FIRST NAME	MI	SOCIAL SECURITY NUMBER
ADDRESS		CITY, STATE, ZIP	TELEPHONE NUMBER
ARE YOU 18 YEARS OF AGE OR OLDER? _____ YES _____ NO		If under 18, do you have working papers?	
If not, please state your age _____		Minimum hire age is 11	_____ YES _____ NO Required

JOB PREFERENCE & AVAILABILITY

Check off your job preferences below (max 3) in preference order :

Theodore D. Young Community Center	Have you worked for the Town of Greenburgh before?
- Programs	Yes _____ No _____
- Day Camps	Department & Dates:
- Lifeguard	
Parks & Recreation	Availability to work:
- Day camps	Dates: From _____ To _____
- Programs	<i>Month/Day Month/Day</i>
- Lifeguard	
- Parks/Grounds	
Department of Public Works	Times: From _____ To _____
- Sanitation	<i>am/pm am/pm</i>
- Water Shop	
- Equipment and Repair	
- Highway	
Library	

EDUCATION	Name & Location	Course/Major	Years Completed
Grammar School			
High School/GED			
College/Business School			
Graduate/Professional			
Certificate/Special Training			

EMPLOYMENT HISTORY *Please list jobs with most recent first*

NAME & ADDRESS OF EMPLOYER	From Month/year	To Month/year	Kind of Work or List Position	Salary	Reason for Leaving and Supervisor's Name/Phone

Fill out application - then print, sign and return.
Or scan and email to recreation@greenburghny.com.

NAME:

SKILLS

Do you have any computer skills? No ____ Yes ____ Specify:		Can you type? No ____ Yes ____ WPM		Any other skills? Please specify.			
Do you have a Driver's License? No ____ Yes ____ Type ____		Can you operate any other Equipment? No ____ Yes ____ Specify ____					
Lifeguard Certifications:		<u>Current Cert</u>	<u>Expiration</u>	In addition to English, are you fluent in any other language? No ____ Yes ____			
R-94				<u>Language</u>	<u>Speak</u>	<u>Read</u>	<u>Write</u>
R-01							
First Aid							
CPR/PR							
Other:							

BACKGROUND *All statements are subject to verification*

Have you ever been convicted of a crime (felony, misdemeanor, or violation)? No _____ Yes _____
If yes please explain. Include conviction and date. Attach additional pages if necessary
A conviction of a felony, misdemeanor or violation is not an automatic bar to employment, but will be considered in accordance with Section 752 of the Correction Law.

Have you ever been released from a job for a reason other than lack of work or end of program?
No ____ Yes ____ If yes, please explain.

AFFIRMATION *This section MUST be completed*

I affirm that all statements made on this application (including any attached papers) are true under the penalties of perjury. Your signature below shall constitute your consent for use by the prospective appointing authority as part of a background investigation.

Pursuant to 210.45 of the New York State Penal Law, it is a crime punishable as a Class "A" misdemeanor to knowingly make a false statement herein.

Applicant's Signature _____ Date _____

_____ Email Address _____

If Applicant Is Under Age 18, the Signature of a Parent or Legal Guardian is Required

I have read my child's/ward's completed application form and hereby give my permission for her/him to be hired by the Town of Greenburgh for the purpose of seasonal employment and further give permission for him/her to receive emergency medical treatment if necessary. If at any time I revoke this permission, I will do so in writing to the Town of Greenburgh Comptroller's Office and, upon receipt by the Comptroller's Office of said revocation, my child's /ward's employment shall be terminated.

Signature of Parent or Legal Guardian _____ Date _____

Print Name _____

The Town of Greenburgh is an Equal Opportunity Employer.

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