

Application for Employment



United Way of
Dutchess County

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status.

(Please Print)

Position applied for	Date of application
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Last Name	First Name	Middle Name
Address	Number	Street
	City	State
	Zip Code	
Telephone Number(s)		Social Security Number

Are you currently employed? Yes No

May we contact your present employer? Yes No

On what date would you be available for work? _____

Have you ever been convicted of a crime? Yes No

(Conviction will not necessarily disqualify an applicant for employment)

If yes, please explain: _____

Education:

	Name/Address of School	Course of Study	Years Completed	Diploma/Deg
Elementary School				
High School				
Undergraduate College				
Graduate/Professional				
Other (specify)				

Employment Experience:

Start with your present or last job. Include any job-related to military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates Employed From To		Work Performed
Address				
Telephone Number(s)		Hourly Rate salary Starting Final		
Job Title	Supervisor			
Reason for leaving				
Employer		Dates Employed From To		Work performed
Address				
Telephone Numbers(s)		Hourly Rate Salary Starting Final		
Job Title	Supervisor			
Reason for leaving				
Employer		Dates Employed From To		Work performed
Address				
Telephone Number(s)		Hourly Rate Salary Starting Final		
Job Title	Supervisor			
Reason for leaving				

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership, which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

State any additional information you feel may be helpful to us in considering your application.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such job or occupation is attached.

Yes No

References:

1.	
Name	Phone # ()
(Address)	
2.	
Name	Phone # ()
(Address)	
3.	
Name	Phone # ()
(Address)	

Applicant's Statement:

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be change by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of applicant

Date