

Employment Application - Historic Cold Spring Village

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.

Date: _____ / _____ / 20____

APPLICANT DATA

Position Applied For: _____

Full Name: _____
LAST FIRST MIDDLE

Address: _____

City: _____ State: _____ Zip: _____ Email: _____

Primary Phone: _____ Secondary Phone: _____

Date Available to Start: _____ SSN: _____ Salary Requirement: _____

If you are 18 and we require a work permit, can you furnish one? _____ Yes _____ No

If No, please explain: _____

Have you ever worked for this organization? _____ Yes _____ No If yes, when? _____

Are you a citizen of the United States _____ Yes _____ No

If not, are you legally allowed to work in the United States _____ Yes _____ No

Type of employment desired: _____ Full Time _____ Part Time _____ Seasonal

EDUCATION

High School: _____ # of years completed _____

Did you graduate? _____ Yes _____ No GPA: _____ Class Rank: _____

College/University: _____ Address: _____

Major: _____ GPA: _____ Class Rank: _____

Other: _____ # of years completed _____ Did you graduate? _____ Yes _____ No

Major: _____ GPA: _____ Class Rank: _____

REFERENCES

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Please list any hobbies, special interests or arts and crafts you are interested in:

**PREVIOUS
EMPLOYMENT (begin with the most recent position)**

Dates of Employment: From ____/____/____ To ____/____/____ Position(s) Held: _____
Firm: _____ Address: _____
Phone: _____ Supervisor: _____ Title: _____
Responsibilities: _____
Starting Salary and Title: _____ Ending Salary and Title: _____ Reason
for Leaving: _____ May we
contact this employer for a reference? ____ Yes ____ No

Dates of Employment: From ____/____/____ To ____/____/____ Position(s) Held: _____
Firm: _____ Address: _____
Phone: _____ Supervisor: _____ Title: _____
Responsibilities: _____
Starting Salary and Title: _____ Ending Salary and Title: _____ Reason for
Leaving: _____ May we
contact this employer for a reference? ____ Yes ____ No

Dates of Employment: From ____/____/____ To ____/____/____ Position(s) Held: _____
Firm: _____ Address: _____
Phone: _____ Supervisor: _____ Title: _____
Responsibilities: _____
Starting Salary and Title: _____ Ending Salary and Title: _____
Reason _____ for _____ Leaving: _____
May we contact this employer for a reference? ____ Yes ____ No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from all liability when responding to inquiries in connection with my application. In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: _____