Town of East Fishkill Seasonal Application

Title of Position: _____

Town of East Fishkill HR Use Only

Approved _____
Conditional _____
Disapproved _____

1. Social Security Number: _____ - _____ - _____

2. _____
Last Name, First Name, Initial

_____
Address

_____
City State Zip Code

_____
Day Phone Evening Phone

3. If you are under 18 years of age, can you provide proof of eligibility to work? Yes _____ No _____

4. If the position you are applying for has minimum or maximum age limits (see job description), please enter your date of birth:

Month _____ Day _____ Year _____

5. Are you currently a U.S. citizen? Yes _____ No _____
If "No", please give alien registration number:
_____

6. **CERTIFICATIONS/LICENSES: (*Attach a copy of your certification/license to this application.)**

Title/Issuing Authority	License #	Original Date of Issue	Expiration Date

Do you possess a valid license to operate a motor vehicle in New York? Yes _____ (Class _____) No _____

7. **EDUCATION:**

High School: Do you possess a high school or equivalency diploma? Yes _____ No _____ If no, last grade completed: _____
Name of High School _____

College:

Name/Location	Dates Attended	Major	# of Credits	Degree Earned

8. **WORK EXPERIENCE: (Attach additional sheets if necessary.)**

Name of Employer/Address _____ **Title**_____

Dates of Employment (From Mo/Yr) _____ **(To Mo/Yr)** _____ **# of hours/wk**_____ **Supervisor** _____

Duties Performed: _____

_____

Name of Employer/Address _____ **Title**_____

Dates of Employment (From Mo/Yr) _____ **(To Mo/Yr)** _____ **# of hours/wk**_____ **Supervisor** _____

Duties Performed: _____

_____

Affirmation and Authorization to Investigate and Release

The undersigned applicant hereby affirms that the statements made on this application and any attached papers or documents are true under the penalties of disqualification and perjury.

The undersigned applicant hereby authorizes the Town of East Fishkill or its agents to investigate matters necessary for the verification of the qualifications of the applicant. Such authorization shall include the right to examine any and all records, files, histories or other information relating to the applicant in the possession of any federal, state or municipal authority, corporation, agent or person. Furthermore, such investigation may include a criminal background investigation, which would require a fingerprint check, to determine overall suitability for employment. Failure to meet standards for the background investigation may result in disqualification. The applicant voluntarily releases from liability all persons or entities supplying or collecting such information.

_____ _____
Signature Date