

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

NOTE: If a position requires a specific license to operate a motor vehicle, the applicant must provide the appointing authority proof of a current, valid license. (subject to verification prior to appointment)

Employment Desired:
Position: _____ Start Date: _____ Salary Desired _____

Have you ever applied before? Which department? When?

Disclaimer and Signature

I understand that as part of the background investigation process I may be required to participate in a test for the use of intoxicants and controlled substances and that evidence of the use of intoxicants and controlled substances may lead to my disqualification from appointment or termination from employment. I also understand that if I refuse to participate in such test I will be removed from further consideration for employment.

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

VILLAGE OF TUCKAHOE IS AN EQUAL OPPORTUNITY EMPLOYER

It is the policy of Village of Tuckahoe to provide for and promote the equal opportunity of employment, compensation, and other terms and conditions of employment without discrimination because of age, race, creed, color, national origin, sex, disability, genetic disposition, carrier status, marital status, sexual orientation, gender identity, or record of offense.

UPON COMPLETION RETURN TO:

Village of Tuckahoe
65 Main Street -Room 206
Tuckahoe, NY 10707