

Village of Buchanan Employment Application

Please type or print clearly. This application must be completed and signed personally by the applicant. Each question must be answered in full. If you answer no or none, indicate such. We appreciate your interest in employment with the Village of Buchanan.

We are an Equal Opportunity Employer. We consider all applications for all positions without regard to race, religion, color, gender, age, national origin, physical or mental disability, marital status, veteran status, genetic disposition, sexual orientation, or any other legal protected status. This application for employment will be considered active for a period of time not to exceed six (6) months. Any applicant wishing to be considered for employment beyond this time should reapply by completing another employment application.

PERSONAL

Name (last, first)	Position applied for:		
Address	City	State	Zip Code
Telephone Number	Social Security Number		
Have you been employed by the Village previously? If Yes please state dates.	Email (optional)		

Please circle

If you are under 18, can you provide proof of your eligibility to work?	Yes	No
Are you currently employed?	Yes	No
Are you available to work? Full Time _____ Part Time _____ Seasonal _____		
Are you a citizen of the United States?	Yes	No
Have you been convicted of a felony within the last 7 years? <i>Conviction will not necessarily disqualify an applicant from employment</i>	Yes	No
If yes please explain:		

EMPLOYMENT (Start with most recent)

From:	To:	Employer phone number:
Employer:		Duties:
Address:		
Job Title:	Supervisor:	
Starting Salary:	Ending Salary:	Reason for leaving:

May we contact employer at above number? Yes _____ No _____

From:	To:	Employer phone number:
Employer:		Duties:
Address:		
Job Title:	Supervisor:	
Starting Salary:	Ending Salary:	Reason for leaving:

May we contact employer at above number? Yes _____ **No** _____

From:	To:	Employer phone number:
Employer:		Duties:
Address:		
Job Title:	Supervisor:	
Starting Salary:	Ending Salary:	Reason for leaving:

May we contact employer at above number? Yes _____ **No** _____

EDUCATION/EXPERIENCE

Type of School	Name and location of school	Number of years completed	Course of Study	Diploma or Degree Obtained
High School or Preparatory School				
College				
Other				

MILITARY HISTORY

U.S. Military Branch	Entry Date	Discharge Date	Training or Specialty

SKILLS

List certificates, licenses (including driver's license or CDL endorsement or professional achievements that would support your qualifications for employment):	List any additional skills, technical or professional knowledge that you feel would support your application:

APPLICANT SIGNATURE

All statements are subject to verification

THIS AFFIRMATION MUST BE COMPLETED: I affirm that the statements provided in this application (and attachments) are true under the penalties of perjury. (Applicants are advised that all statements made by them in connection with their application(s) are subject to investigation and verification)

Signature of Applicant Date

Please complete this form and remit it to the Village of Buchanan Clerk's Office, either in person or by mail to the following address: Village Clerk, 236 Tate Avenue, Buchanan, NY 10511.

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview: YES _____ NO _____ Date: _____

Remarks: _____

Employed: YES _____ NO _____
Job Title _____ Date of Employment _____

Notes: _____
