

# RECREATION APPLICATION

## VILLAGE OF BUCHANAN



MUNICIPAL BUILDING, BUCHANAN, N.Y. 10511-1298

914.293-8391

recreationdept@villageofbuchanan.com

Date: \_\_\_\_\_ Position applying for: \_\_\_\_\_

***\*\*Print clearly & Fill out completely! \*\****

Answer each question completely, leaving non-applicable spaces blank.

Name: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Your cell phone number: \_\_\_\_\_ Home number: \_\_\_\_\_

Your e-mail: \_\_\_\_\_

Do you have CPR certification? \_\_\_\_\_ (Copy and attach to application)

*List all work experience:*

Job title: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer's address: \_\_\_\_\_

Employer's phone number: \_\_\_\_\_

Dates worked for this Employer: \_\_\_\_\_

If more space is needed, attach a separate sheet with information on it.

Have you ever been employed by the Village of Buchanan? \_\_\_\_\_

If so, when: \_\_\_\_\_

List 3 persons who I may contact for information as to your character. (NO relatives/friends)

List Name, Address and Phone number.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ALL INFORMATION PRESENTED HERE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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.