

## Phelps Community Center Phelps, NY 14532 315-548-8484

## **Employment Application**

lame			Date		
Street		City	State	Zip Code	
Phone Number	Email				
Program of interest:					
$\square$ Early Learning Center $\square$ Sch	ool Age Program 🗆 H	ead Start 🗆 Fitness	Center □ Dance □	Other	
Position:		Date Availa	ble:		
Full Time ☐ Part Time ☐	Desired Hours:		_ Desired salary:		
Are you willing to work overtime	ne? □ Yes □ No	Referred By:			
Have you ever been employed	at the PCC before?	☐ Yes ☐ No	Program:		
Position:	Dates	Employed:			
eferences: Please list three work xperience may list school or volu		•	e do not list relatives	. Individuals with no wor	
Name and Position		Company		Telephone	

Work Experience: Please list employment starting with the most recent	. You may list volunteer	or military experience
only is verifiable.		

	Name, Address and Phone		Salary	Title	Supervi	sor	Reason for
om To							leaving
I	1			-1			L
you employed?	$\square$ Yes $\square$ No If so, ma	ay we inqu	ire with yo	ur present emp	oloyer?	☐ Yes	□ No
cation:							
	Name and Address	Cour	se of Study	Gra	duate	Di	nloma/Degre
School	Name and Address	Cour	se of Study	Gra	duate	Di	ploma/Degre
	Name and Address	Cours	se of Study	Gra	duate	Di	ploma/Degre
	Name and Address	Cours	se of Study	Gra □ Yes		Di	ploma/Degre
School	Name and Address	Cours	se of Study			Di	ploma/Degre
School	Name and Address	Cours	se of Study		s □ No	Di	ploma/Degre
School High School	Name and Address	Cours	se of Study	☐ Ye:	s □ No	Di	ploma/Degre
School High School	Name and Address	Cours	se of Study	☐ Ye:	s □ No s □ No	Di	ploma/Degre
High School College	Name and Address	Cours	se of Study	□ Yes	s □ No s □ No	Di	ploma/Degre
School High School College	Name and Address	Cours	se of Study	□ Yes	S □ No S □ No	Di	ploma/Degre

We are committed to a policy for Equal Employment Opportunity and will not discriminate on any legally recognized basis, including but not limited to, race, age, color, religion, sex, marital status, national origin, citizenship, ancestry, physical or mental disability, veteran status, military status, genetic disposition, sexual orientation, or gender identity.

Answer the following four questions only if the apply to you:
1. If driving is a requirement for the job for which you are applying, do you have a valid driver's license? $\Box$ Yes $\Box$ No
2. If you are a minor, can you produce the work certificate necessary to obtain employment? $\Box$ Yes $\Box$ No
3. Are you able, at the time of employment, to submit verification of your legal right to work in the US? (Verification and completion of Form 1-9 must be submitted no later than three business days after date of hire.) $ \square \  \                              $
4. Have you ever been convicted of a felony which is substantially related to the functions or qualification of the position(s) for which you are applying? Note: This question does not apply to convictions which have been expunged or sealed. (A conviction record will not necessarily be a bar to employment)  Yes No
If so, please describe fully the criminal conviction(s), listing the nature of the offense(s) and your rehabilitation since the conviction(s).
Applicant's Statement
By signing this application, I understand that if hired by the Phelps Community Center, I will be an employee at will. This means my employment with PCC may be terminated at any time at the option of PCC or me. I also understand that neither this application nor any communication by a management representative is intended to create or does in fact create a contract of employment.
I agree to conform to the rules and regulations of PCC and I understand that PCC has complete discretion to modify such rules and regulations at any time, except that it will not modify its policy of employment at will.
The above information is complete and true to the best of my knowledge. I understand that and misrepresentation or omission on my part of the facts in this application may result in immediate dismissal.
I herby authorize Phelps Community Center to conduct any investigation necessary concerning any part of my background related to the position I am seeking. I release all parties from any liability in connection with the provision and use of such information.
I authorize Phelps Community Center to conduct a reference investigation for employment purposes. I understand that this reference checking process will not begin until I am notified verbally that I am being considered as a finalist for a position. I authorize and request my current/former supervisors, subordinates and/or other colleagues to furnish Phelps Community Center with information concerning my past and present job performance, character, work history, salary information, educational background, criminal history, and any other information which may be pertinent to my qualifications. I also authorize the PCC to photocopy this authorization for purposes of checking more than one reference.
Applicant's Signature: Date:
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