



**TOWN OF HENRIETTA RECREATION
DEPARTMENT & YOUTH BUREAU
475 CALKINS ROAD
HENRIETTA, NY 14467**

EMPLOYMENT APPLICATION

Date _____

NAME _____
LAST FIRST MI

ADDRESS _____ CITY: _____ ZIP CODE _____

E-MAIL _____ HOME PHONE _____ CELL PHONE _____

POSITION APPLYING FOR _____ ARE YOU AT LEAST 18 YRS. OLD? _____

IF NOT, PLEASE GIVE DATE OF BIRTH _____ DO YOU HAVE A WORK PERMIT? _____

ARE YOU A US CITIZEN? _____ IF NOT, ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES _____

	ELEMENTARY	HIGH SCHOOL	COLLEGE/UNIVERSITY	GRADUATE/PROF.
SCHOOL				
YEARS COMPLETED	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
DEGREE RECEIVED				
COURSE OF STUDY				

WORK EXPERIENCE:

Please describe your past work experience beginning with your current or most recent employment. Use additional sheet if needed.

FROM: (month/year) TO:	EMPLOYERS NAME, ADDRESS, PHONE	SUPERVISOR	POSITION, TITLE & DUTIES IN DETAIL	REASON FOR LEAVING

Please list other experiences, skills or qualifications that will be of special benefit in the job for which you are applying. (Please include volunteer work).

Please Include Formal Training. I.E. (lifeguard training, first aid, CPR, AED training, sign language, etc.)

Have you ever been convicted of OR pled guilty to any offense other than a minor traffic violation? If yes, explain details:

Have you had any coaching experience? If so, which sports? _____

List any formal training you have received in coaching. _____

REFERENCES: (PERSONAL-NOT RELATED)

NAME	ADDRESS	PHONE NUMBER	YEARS KNOWN
1.			
2.			
3.			

I certify that all information in this application is true and correct and without material omissions.. I understand that any incorrect, incomplete or false information given by me is sufficient cause to void this application and/or terminate my employment.

Printed Name

Signature

Date

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