

**TEENSCAPE '19
APPLICATION FOR EMPLOYMENT**

(Must be at least 18 years old by 6/30/19 and available to work 7/1/19 through 8/9/19)

DUE BY FEBRUARY 28, 2019

Along with this application, you MUST include three letters of reference with contact information.

Name: _____

Have you worked for the Village of Irvington before?(Day Camp, DPW, etc.) Yes _____ No _____

If yes, when and in what capacity? _____

List school clubs/organizations/ sports: _____

List hobbies/special interests: _____

Do you currently hold a valid American Red Cross CPR certification? Y___ N___ If yes, exp. date: _____

Do you currently hold a valid American Red Cross first aid certification? ___ N___ If yes, exp. date: _____

Do you currently hold a valid lifeguard certification? Y___ N___ If yes, exp. date: _____

Do you currently hold a valid W.S.I. certification? Y___ N___ If yes, exp. date: _____

When are you available for an interview (if you attend school outside of the area, will you be in the area at all during the month of March and April)?: _____

IMPORTANT INFORMATION

The camp directors will interview qualified applicants prior to the camp season. The village board must approve any applicant the directors feel they would like to hire for the camp season before officially being hired.

Before being officially hired, all applicants' names must be submitted and cleared through the New York State Division of Criminal Justice Service Sex Offender Registry based on the New York State Child Safety Act.

Applicant's Signature: _____ Date: _____

If hired, you must submit the following by May 1, 2019 to secure your position:

- 1) Completed tax forms provided by the village
- 2) Copies of two of the following: birth certificate, passport, social security card, driver's license.
- 3) A copy of your Immunization Record
- 4) Copies of any certifications/ cards
- 5) Copy of your health insurance card

Please return completed application and three letters of reference no later than 2/28/19:

Irvington Recreation/ Attn: TEENSCAPE 71 Main St. Irvington NY 10533

Any questions, contact mdinardo@irvingtonny.gov or athornton@irvingtonny.gov or 591-7736

Applicant Contact Information:

Application Address: _____

E-Mail: _____

Home#: _____ Cell #: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Reference Information:

All applicants are required by the Westchester County Department of Health to have three current letters of reference with contact information. Below, please list the names and contact information to correspond with your three submitted reference letters.

1. Name: _____

Phone number: _____

E-Mail Address: _____

2. Name: _____

Phone number: _____

E-Mail Address: _____

3. Name: _____

Phone number: _____

E-Mail Address: _____

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VILLAGE OF IRVINGTON 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 answer is NO or NONE, indicate such. We appreciate your interest in employment with the Village of Irvington.

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 predisposition or carrier status, sexual orientation, or any other legally protected status or class. Applicants requiring a reasonable accommodation to participate in the application and/or interviewing process are encouraged to contact the Village Administrator's Office. This application for employment will be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time period should reapply by completing another employment application.

BIOGRAPHICAL DATA	Name (First, Middle, Last)		Social Security Number	
	Address		Phone Number	
	City		State	Zip
	Position Applied For		Salary Desired	
	Are You Available For		Date Available For Work	
	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary			
	How were you referred to the Village of Irvington?			
	<input type="checkbox"/> Newspaper <input type="checkbox"/> Internet <input type="checkbox"/> Civil Service Job Posting <input type="checkbox"/> Walk-in <input type="checkbox"/> Employee Referral _____ <input type="checkbox"/> Other _____			
	Are you currently employed?			<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, may we contact your employer to obtain employment information?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever filed an application or interviewed for employment with the Village of Irvington?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, give month and year ____/____/____				
Have you ever been employed with the Village of Irvington before?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, give dates From ____/____/____ To ____/____/____				
Are you legally eligible for employment in the United States?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Employment eligibility verification will be required upon employment.</i>				
If you are under 18 years of age, can you provide required proof of your eligibility to work?			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
If you have been provided with a job description for the position for which you are applying, are you able to perform the essential functions of the position with or without reasonable accommodation?			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	

EDUCATIONAL BACKGROUND	Type of School Attended	Name and Location of School	Number of Years Completed <small>(do not give dates)</small>	Course of Study	Diploma or Degree Obtained
	High School or Preparatory School				
College					
Other					

SKILLS	Typing Speed: _____ WPM	Data Entry: _____ # Numeric Keystrokes/Hour	_____ # Alpha Keystrokes/Hour
	Computer Skills:		
	List certificates, licenses (<i>including driver license or CDL endorsement</i>) 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:	
If you are applying for a position which requires a Commercial Driver License, provide Driver License Number here:			

List your previous four (4) employers whether or not they seem relevant to the position for which you are applying.

Present or Last Employer			
Name of Employer	Address		Phone Number
	City	State	Zip
Employment Dates (Month/Year)	Description of duties, responsibilities and significant accomplishments		Salary
Title of Position	Name and Title of Supervisor		
Reason for leaving			

Next Previous Employer			
Name of Employer	Address		Phone Number
	City	State	Zip
Employment Dates (Month/Year)	Description of duties, responsibilities and significant accomplishments		Salary
Title of Position	Name and Title of Supervisor		
Reason for leaving			

Next Previous Employer			
Name of Employer	Address		Phone Number
	City	State	Zip
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Next Previous Employer			
Name of Employer		Phone Number	
Address	City	State	Zip
Employment Dates (Month/Year)		Salary	
Title of Position		Name and Title of Supervisor	
Description of duties, responsibilities and significant accomplishments			
Reason for leaving			

U.S. MILITARY HISTORY			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
U.S. Military Branch	Entry Date	Discharge Date	Training or Specialty

References (Other than relatives or former supervisors; list three)				
Name/Occupation			Phone Number	
Address	City	State	Zip	Years Known
Name/Occupation			Phone Number	
Address	City	State	Zip	Years Known
Name/Occupation			Phone Number	
Address	City	State	Zip	Years Known

Conviction Record Status		
Have you ever been convicted of and/or plead guilty to a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you been convicted of and/or plead guilty to a misdemeanor within the past five years? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If you answered 'yes' to either question, please provide additional information such as the crime(s), date(s), court location, sentencing information, disposition of sentence, and rehabilitation completed. Please note that a 'yes' answer to this question does not necessarily disqualify an applicant from employment with the Village. The nature of the violation and all other appropriate circumstances will be considered. The Village reserves the right to reject individuals for employment based on job-related convictions.		
Date	County/State	Conviction/Explanation

I certify that the facts contained on this application are true and complete to the best of my knowledge. I understand that any misrepresentation is cause for voiding this application or termination of employment, if hired. I authorize investigation of any information provided on this application form. I also authorize investigation of my employment record and references, and release all parties from all liability for any damage that may result from furnishing same to you. I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time, subject to applicable federal, state and/or local rules and regulations and/or collective bargaining agreements. For positions subject to the federal Department of Transportation regulations regarding controlled substances and alcohol use testing (Part 382), I understand that as a condition for employment with the Village of Irvington, a pre-employment controlled substance test will be required and must be passed.

Date: _____

Signature of Applicant: _____