



**City of Elmira**  
 Office of Personnel  
 Phone: (607) 737-5993  
<http://www.cityofelmira.net>

317 E. Church St  
 Elmira, NY 14901  
 Fax: (607) 737-5824

## City of Elmira Application for Employment

**"An Equal Opportunity Employer"**

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Personnel Office.

**POSITION APPLIED FOR:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**TYPE OF EMPLOYMENT:**     Full Time         Part Time     Temp         Seasonal

**NAME:** \_\_\_\_\_  
                             (Last)  (First)  (Middle)

**ADDRESS:** \_\_\_\_\_  
                             (Street)  (City)  (State)  (Zip)

**Telephone:** \_\_\_\_\_ **Social Security #** \_\_\_\_\_

**Driver's License #** \_\_\_\_\_

May we contact you at work? If so, telephone # \_\_\_\_\_

Have you ever been employed by the City of Elmira before?     Yes                   No  
 If so, under what name \_\_\_\_\_ **Dates:** \_\_\_\_\_

Are you legally eligible for employment in this country?     Yes                   No

**Date available for work:** \_\_\_\_\_

Have you ever been bonded? \_\_\_\_\_

Have you ever been convicted of a crime?                           Yes                   No  
 If yes, explain: \_\_\_\_\_

Have you ever forfeited bail bond posted to guarantee your appearance in court to answer to any criminal charge?  
 Yes                   No

(Conviction will **NOT** necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.)

Were you ever dismissed or discharged from any employment for reasons other than lack of work or funds?  
 Yes                   No    **Explain:** \_\_\_\_\_

Did you ever resign from any employment rather than face dismissal?  
 Yes                   No

Did you ever receive a discharge from the Armed Forces of the United States which was other than "Honorable"?  
 Yes                   No    **Explain:** \_\_\_\_\_

Applicants conditionally offered employment must have a pre-employment medical examination. Results of the examination will be kept confidential and may be released only to the Office of Personnel. Only job related medical information will be used for employment decisions.

The New York State Human Rights Law prohibits discrimination in employment because of age, race, creed, color, national origin, sex, sexual orientation, disability, or marital status. Accordingly, nothing in this application should be viewed as expressing directly or indirectly, any limitation, specification or discrimination as to age, race, creed, color, national origin, sex, sexual orientation, disability, or marital status in connection with employment by the City of Elmira.

**EMPLOYMENT HISTORY**

Provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER	TELEPHONE ( )	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		FROM	TO	
JOB TITLE		HOURLY RATE/SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATE/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE? [ ] YES [ ] NO [ ] LATER		\$	PER	

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		FINAL		
MAY WE CONTACT FOR REFERENCE? [ ] YES [ ] NO [ ] LATER		\$	PER	

**COMMENTS** INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT \_\_\_\_\_

**SKILLS AND QUALIFICATIONS** – Summarize any special training, skills, licenses, and/or certificates that may qualify you as being able to perform job related functions in the position for which you are applying.

**EDUCATIONAL BACKGROUND**

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank. E. Major field of study. F. Minor field of study (if applicable).

A. SCHOOL	B. YEARS COMPLETED	C. DEGREE OR DIPLOMA	D. GPA OR CLASS RANK	E. MAJOR	F. MINOR

**REFERENCES**

List name and telephone number of three (3) business/work references who are *not* related to you and are previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

NAME	RELATIONSHIP	TELEPHONE	YEARS KNOWN
1.		(    )	
2.		(    )	
3.		(    )	

**ADDITIONAL INFORMATION**

List professional, trade, business, or civic organizations and any offices held. EXCLUDE MEMBERSHIPS WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, SEXUAL ORIENTATION, DISABILITY OR ANY OTHER SIMILARLY PROTECTED STATUS

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc. EXCLUDE INFORMATION WHICH WOULD REVEAL SEX, RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, SEXUAL ORIENTATION, DISABILITY OR ANY OTHER SIMILARLY PROTECTED STATUS

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List any additional information you would like us to consider

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**AUTHORIZATION**

- I. **MISREPRESENTATION:** I hereby certify and affirm that all statements given herein are true and complete to the best of my knowledge and do so affirm under penalty of perjury. I understand that any misrepresentation is a cause for voiding this application or for termination of employment, if hereinafter hired.
  
- II. **BACKGROUND REVIEW:** I agree that for consideration for employment with the City of Elmira, I hereby authorize and agree that the City may perform a full criminal background check in order to verify the information I have provided herein. I authorize the City to obtain any criminal court documents and/or Police records.

I authorize the City of Elmira to investigate any and all statements contained in the application for employment. I also authorize permission to all current and former employers to release any and all information that may be requested by the City of Elmira as part of the application process. This permission is also extended to all persons, schools, companies, corporations and credit bureaus for any records, documents, and other information related to this application process.

- III. **RELEASE:** I hereby release all parties that supply any information from any liability or responsibility for supplying said information. I further hereby agree not to assert any claims or causes of actions of any kind against the City of Elmira or its officials, agents, or employees as a result of the criminal conviction background check or any other related investigation of the application process.

I acknowledge that the City of Elmira has made no representation of any kind as to whether employment will be offered at the conclusion of this criminal conviction background check or other investigations related to this application process. I agree to take all pre-employment physicals and drug screen examinations as may be requested by the City of Elmira and release all results to the City of Elmira. All offers of employment shall be conditional upon the results of the pre-employment physical examinations and drug screen examinations.

\_\_\_\_\_  
Signature (written)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature (printed)

\_\_\_\_\_  
Indicate any other surname (last name) by which you are or have been known.  
Provide any additional information relative to change of name or nickname  
necessary to enable a check on your school or work record

**Failure to fully complete this application will disqualify you from consideration.**