



# Employment Application

Expiration: \_\_\_\_\_

## POSITION PREFERENCE

POSITION APPLYING FOR \_\_\_\_\_

TYPE OF EMPLOYMENT:  Full-time  Part-time  Temporary/Summer

ARE YOU WILLING TO BE A SUBSTITUTE?  Yes  No

MINIMUM ACCEPTABLE SALARY : \$ \_\_\_\_\_ DATE AVAILABLE : \_\_\_\_\_

HOW DID YOU LEARN OF THIS VACANCY: \_\_\_\_\_

## PERSONAL INFORMATION

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

SOCIAL SECURITY NUMBER: \_\_\_\_\_

FORMER NAMES: \_\_\_\_\_  
(for purposes of verifying work & education records)

MAILING ADDRESS: \_\_\_\_\_

PRIMARY PHONE #: ( ) \_\_\_\_\_

SECONDARY PHONE #: ( ) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

IN CASE OF AN EMERGENCY, CONTACT: \_\_\_\_\_

(Name) (Phone)

ARE YOU A MEMBER OF A NEW YORK STATE RETIREMENT SYSTEM?  Yes  No

If yes, what system? \_\_\_\_\_

What is your membership number? \_\_\_\_\_

HAVE YOU EVER BEEN OR ARE YOU CURRENTLY AN EMPLOYEE OF THIS BOCES?  Yes  No

## PLEASE CHECK PREFERRED WORK LOCATION(S):

TECHNICAL & CAREER EDUCATION:

- Ontario County Area
- Wayne County Area
- Other \_\_\_\_\_
- All

SPECIAL EDUCATION

- Ontario County Area
- Wayne County Area
- Other \_\_\_\_\_
- All

TECHNOLOGY / OTHER

- Regional Support Center, Newark
- Genesee Valley BOCES, LeRoy

## HUMAN RESOURCES

Eisenhower Building  
131 Drumlin Court  
Newark, New York 14513-1863

Phone: 315-332-7291

Fax: 315-332-7373

Email: hrjobs@wflboces.org

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

## CIVIL SERVICE STATUS

Are you currently on any active Civil Service lists?  Yes  No

If yes, which list(s)? \_\_\_\_\_

Are you currently a member of a volunteer fire department?  Yes  No

If yes, what is the name of the fire company? \_\_\_\_\_

**This is a Civil Service position.**

**You must complete the Ontario County Civil Service form which you were given with this application and submit it with the appropriate filing fee (if applicable).**

## EDUCATIONAL PREPARATION

Name and Location of School	Major / Minor	Did you graduate?
High School		

Name / Location	Dates Attended	Sem. Hrs.	Major/ Minor	Degree
College (Undergraduate)				
College (Graduate)				
Vocational / Technical / Trade				

*It is the applicant's responsibility to have official college transcripts, placement folder, and copy of certification forwarded to the Human Resources Office.*

## PROFESSIONAL / VOCATIONAL LICENSE (attach a copy)

(ex. DEC pesticide applicator, commercial driver's license, child care provider)

Type & issuing authority \_\_\_\_\_ Expiration date \_\_\_\_\_

Type & issuing authority \_\_\_\_\_ Expiration date \_\_\_\_\_

*(Begin with most recent. Attach additional sheets if necessary. Must be completed even if a resume is attached.)*

# EMPLOYMENT HISTORY

EMPLOYER	TELEPHONE	DATES EMPLOYED FROM	TO	SALARY
ADDRESS				
JOB TITLE		SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES		
IMMEDIATE SUPERVISOR, TITLE & TELEPHONE				
REASON FOR LEAVING				
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER				

EMPLOYER	TELEPHONE	DATES EMPLOYED FROM	TO	SALARY
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JOB TITLE		SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES		
IMMEDIATE SUPERVISOR, TITLE & TELEPHONE				
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REASON FOR LEAVING				
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER				

## ADDITIONAL REFERENCES FAMILIAR WITH YOUR WORK

NAME	ADDRESS	PHONE	HOW KNOWN

## MILITARY EXPERIENCE

Branch of Service: \_\_\_\_\_ Rank/Specialty: \_\_\_\_\_

Dates of Service: from \_\_\_\_\_ to \_\_\_\_\_

Type of discharge:  Honorable  Dishonorable

If you answer dishonorable, you will not necessarily be disqualified as an applicant for employment. If you received a dishonorable discharge, please explain below:

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## ADDITIONAL INFORMATION

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

If employed, you must produce two original forms of identification as specified on Form I-9, Employment Eligibility Verification.

Do you have any health condition that would impair your ability to perform some of the functions of the position for which you are applying?  Yes  No

If yes, please explain: \_\_\_\_\_

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Have you ever been convicted of a violation of law?  Yes  No

If you answer yes, you will not necessarily be disqualified as an applicant for employment. If you answer yes, please explain below:

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Are any criminal charges or proceedings pending against you?  Yes  No

If you answer yes, you will not necessarily be disqualified as an applicant for employment. If you answer yes, please explain below:

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Have you ever been dismissed from a position or resigned to avoid dismissal?  Yes  No

If you answer yes, you will not necessarily be disqualified as an applicant for employment. If you answer yes, please explain below:

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## WAIVER AND RELEASE FOR APPLICANT BACKGROUND CHECK

By signing below, I, \_\_\_\_\_, hereby authorize the Wayne-Finger Lakes Board of Cooperative Educational Services (hereafter known as "the BOCES") to verify and investigate all statements I have made on the employment application, related papers and in interviews. I authorize the BOCES to contact all employers and personal references listed on my employment application. In addition, I authorize all individuals, schools and employers mentioned on my employment application to freely provide any information requested that may be relevant and helpful in making a hiring decision. I release any such individuals, schools and employers from any and all legal liability or damage for disclosing any information about me. In addition, I understand that if this form is not signed and submitted with the appropriate completed application form, I will not be considered for employment with the BOCES.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Note: If applicant is under the age of eighteen, a parent or guardian must sign in his/her place.*

## APPLICANT'S STATEMENT

I certify that all statements herein are true, accurate and complete, and I understand that any false, misleading or willful omissions shall be just cause for dismissal or refusal of employment.

I understand that Wayne-Finger Lakes Board of Cooperative Educational Services (hereafter known as "the BOCES") will thoroughly investigate my work and personal history and verify all data given on this application, related papers and in interviews.

I authorize all individuals, schools and employers mentioned therein to provide any information requested about me, and I release them from any and all legal liability or damage for disclosing information about me.

I understand that I am not guaranteed employment by merely completing this application and even if I am hired by BOCES, this document is not to be considered a contract for employment.

Unless otherwise indicated by a collective bargaining agreement or a specific right under state or federal law, I understand that I am an at-will employee and may be terminated with or without just cause at any time by the BOCES. I am also aware that I may resign from employment at any time by giving notice within the proscribed amount of time as stated in the collective bargaining agreement, or if not addressed by the collective bargaining agreement, then by law.

If I am chosen for employment by the BOCES, I agree to conform to its rules and regulations as set forth in the BOCES policies, administrative regulations, operational procedures and contracts. I acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by the BOCES at any time at the BOCES' sole discretion without prior notice to me.

I certify that I am available immediately for employment, and that by accepting employment with the BOCES, I will not be violating any other contracts or restrictive covenants.

Pursuant to the School Finger Printing Law (2000 New York Laws, Chapter 180), I understand that I will not be eligible for employment and can be discharged by the BOCES if the New York State Education Department does not clear me for employment after my fingerprints are reviewed by the Division of Criminal Justice Services.

If requested by the BOCES in connection with this application, I will take a physical examination. I agree that the examining authority may disclose the findings of these examinations to the BOCES and that my initial employment is conditioned upon meeting the requirements of that examination as established by the BOCES.

This employment application will be valid for one (1) year from the date it is received.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# PERSONAL STATEMENT

I would like to be employed by the Wayne-Finger Lakes BOCES because \_\_\_\_\_

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## EQUAL EMPLOYMENT OPPORTUNITY / NON-DISCRIMINATION

*It is Wayne-Finger Lakes BOCES' policy to provide for and promote equal opportunity in education and employment. Wayne-Finger Lakes BOCES does not discriminate, in its programs and activities, against: (i) any student or any candidate for admission (or parent of any such student or candidate); (ii) any employee or applicant for employment; or (iii) any third party, on the basis of actual or perceived race, color, national origin, sex, disability, or age; and, it provides equal access to its facilities to the Boy Scouts and other designated youth groups. Further, Wayne-Finger Lakes BOCES does not discriminate on the basis of religion or creed, religious practice, ethnic group, weight, sexual orientation, gender, military status, genetic status, marital status, domestic violence victim status, criminal arrest or conviction record, or any other basis prohibited by state or federal non-discrimination laws, or unless based upon a bona fide occupational qualification or other exception. Inquiries regarding Wayne-Finger Lakes BOCES' non-discrimination policies and grievance procedures or Title IX should be directed to:*

*Quinn M. Smith, Director of Human Resources  
Administrative Offices  
Regional Support Center  
131 Drumlin Court, Eisenhower Building  
Newark, NY 14513-1863  
Telephone: (315) 332-7282  
Email: qsmith@wflboces.org*