

# NIAGARA COUNTY APPLICATION FOR SEASONAL EMPLOYMENT ONLY

**ANSWER ALL QUESTIONS FULLY AND CAREFULLY. PRINT IN INK OR USE TYPEWRITER. ATTACH ADDITIONAL SHEETS IF NECESSARY IN ORDER TO GIVE COMPLETE AND DETAILED INFORMATION. SIGN EACH ADDITIONAL SHEET.**

**EXACT TITLE OF POSITION APPLYING FOR**

**TITLE**

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**ALL STATEMENTS ARE SUBJECT TO VERIFICATION**

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1. (PLEASE PRINT)

\_\_\_\_\_  
 Last First M.I.

\_\_\_\_\_  
 Street Address (include P.O. Box & Apt. Number for complete mailing address)

\_\_\_\_\_  
 City, Town or Village State Zip

Phone (including area code – list those where you can be reached 8am – 4pm)

Home: \_\_\_\_\_ Other: \_\_\_\_\_

2. Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

3. Are you under 18 years of age? Yes  No   
 If yes, or if minimum and/or maximum age limits established for the position applied for, enter your date of birth here. Example: **Police Officer, Bus Driver, etc.**

Mo \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

4. A. Are you a U.S. Citizen? Yes  No

A. (Non-citizens are required to produce I-151 Alien Registration Card at time of appointment)

B. If you are not a citizen of the United States, do you have the legal right to accept employment in the United States? Yes  No

5. Check the appropriate box to the right of each question.

A. Were you ever dismissed or discharged from any employment for reasons other than lack of work or funds? Yes  No

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

C. Did you ever receive discharge from the Armed Forces of the United States which was other than "Honorable" or which was issued under other than honorable circumstances? Yes  No

D. Have you ever been convicted of any crime (felony or misdemeanor)? Yes  No

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

F. Are you now under charges for any crime? Yes  No

If you answered "Yes" to any of the questions 5 A-F above, **give specifics under "Remarks" on back** of this application. If such explanation is insufficient, you may be required to submit further information. None of the above circumstances represents an automatic bar to employment. Each case is considered and evaluated on individual merits in relation to the duties and responsibilities of the position for which you are applying.

6 A. Have you ever served in the Armed Forces of the United States? (The "Armed Forces of the United States" means the Army, Navy, Marine Corps, Air Force and Coast Guard, including all components thereof and the National Guard when in the service of the United States pursuant to call as provided by Law on a full-time active duty basis other than active duty for training purposes.) Yes  No

B. Did you ever serve on ACTIVE DUTY in the Armed Forces of the United States during any of the following periods?

- Yes  No
- Dec. 7, 1941 to Dec. 31, 1946; June 27, 1950 to Jan. 31, 1955; Feb. 28, 1961 to May 7, 1975.
  - June 1, 1983 to Dec. 1, 1987 – Lebanon;
  - Oct. 23, 1983 to Nov. 21, 1983 – Grenada;
  - Dec. 20, 1989 to Jan. 31, 1990 – Panama;

These time periods are limited to those who have received the Armed Forces Expeditionary Medal.

- Aug. 2, 1990 to end of hostilities (not yet determined) – Persian Gulf;
- U.S. Public Health Service: July 29, 1945 to Dec. 31, 1946 or June 27, 1950 to July 3, 1952

C. Did you receive a discharge which was honorable or were you released under honorable circumstances?

Yes  No

D. Were you a resident of New York State on the date of your INITIAL entry into the Armed Forces of the United States?

Yes  No

E. Are you currently a resident of New York State?

Yes  No

F. Since January 1, 1951, have you used additional credits as a disabled or non-disabled veteran for appointment to any position in the public employment of New York State or any of its civil divisions?

Yes  No

7. Have you been a Niagara County Resident for at least one (1) month?

Yes  No

I AM PRESENTLY A LEGAL RESIDENT OF:

City of:
Village of:
Town of:
School District of:
County of:

**THIS AFFIRMATION MUST BE COMPLETED**

I affirm that the statements made on this application (including all signed attached papers) are true under the penalties of perjury. False statements made herein are punishable as a Class A Misdemeanor under Section 210.45 of the Penal Law.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Indicate any other surname (last name) by which you are or have been known. (print in ink or use typewriter)

DO NOT WRITE IN THIS SPACE

Number \_\_\_\_\_ Approved \_\_\_\_\_

Conditional \_\_\_\_\_ Disapproved \_\_\_\_\_

**APPLICATION COMPLETION AND DETAILING IS YOUR RESPONSIBILITY  
FAILURE TO DO SO WILL CAUSE YOUR DISAPPROVAL**

8. Have you graduated from high school? Yes  No  Name of school  
City and State

If NO, circle highest grade completed 6 7 8 9 10 11 12 Still Attending

I have a New York State High School Equivalency Diploma (indicate the number or attached a copy) Date of Issue

9. **LICENSES & CERTIFICATIONS** (If a license, certificate or other authorization to practice a trade or profession is listed, such as RPN, LPN, CNA, Lifeguards, Recreation Leaders etc... **PLEASE ATTACH A COPY OF LICENSES AND/OR CERTIFICATIONS.**

10. Do you have a valid New York State Motor Vehicle License? Yes  No  Class of license

11. **DESCRIPTION OF EXPERIENCE** beginning with the most recent, described below in detail **ALL EMPLOYMENT THAT IS PERTINENT TO THE POSITION APPLIED FOR.** Relevant volunteer (unpaid) experience will be considered if verified and fully documented. You are responsible for submitting an accurate, adequate and clear description of your experience. Omissions or vagueness will **NOT** be interpreted in your favor. If you have had military service which includes experience pertinent to the position, describe such experience as a separate employment. If your titles or duties changed materially in the course of your service in any one organization, indicate such change clearly and as separate employment. (If more space is needed attach additional sheets of paper).

**UNDER "DUTIES" FOR EACH EMPLOYMENT, DESCRIBE THE NATURE OR WORK PERSONALLY PERFORMED BY YOU WITH ESTIMATED PERCENTAGE OF TIME SPENT ON EACH TYPE OF WORK, IF ANY SUPERVISION BY YOU, AND THE EXTENT OF SUCH SUPERVISION (DIRECT, INDIRECT – FULL-TIME, OCCASIONAL).**

Length of employment Month & Year From To	Company Name	Address	City & State
DESCRIBE DUTIES BELOW (SEE UNDERLINED SECTION IN "DESCRIPTION OF EXPERIENCE")			
Earnings (circle one) \$ WK/MO/YR			
Type of Business			
Your exact title			
Name of your Supervisor			
Supervisor's title			
No. of hours worked per Week (exclusive of over-Time) Hrs.			

**REMARKS OR ADDITIONAL QUALIFYING EXPERIENCE**

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**BACKGROUND INVESTIGATION:** Applicants may be required to undergo a State and National criminal history background investigation, which will include a fingerprint check, to determine suitability for appointment. Failure to meet the standards for the background investigation may result in disqualification.