



Lewis County Head Start
7673 N State Street, PO Box 206
Lowville, NY 13367
Telephone: 315-376-7531
Fax: 315-376-8302

Application for Employment

(Please print plainly)

Date _____

Personal

Name _____
Last First Initial

Present Address _____
Street Number City State Zip

How many years have you lived at this address? _____ Telephone (____) _____

Previous Address _____
Street Number City State Zip

How long did you live there? _____

Position(s) applying for _____ Hourly Rate of Pay Expected \$ _____

How did you learn of this opening? _____

Have you ever worked for Lewis County Head Start? _____ If yes, which center? _____

Name of any relatives employed by Lewis County Head Start _____

If hired, on what date will you be available to begin work? _____

Is there anything that would preclude you from doing this job with or without reasonable accommodations? _____

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Age Discrimination in Employment Act of 1967 prohibits discrimination because of age.

Have you ever been convicted of a felony in any state? No ____ Yes ____

If yes, describe in full _____

Education Background

	Name and Address of School	Course of Study	Last Year Completed				Did You Graduate?	List Diploma or Degree
			5	6	7	8		
Elementary		X						
High School			9	10	11	12		
College			1	2	3	4		
Other (Specify)			1	2	3	4		

Military Service Record

Have you ever served in the armed forces? _____ If yes, which branch? _____

Dates of duty from _____ to _____
Month/Day/Year Month/Day/Year

What were your duties in the Service (include special training and duty station)? _____

Personal References

(Exclude former employers or relatives)

Name and Occupation	Address	Telephone Number

Prior Work History

(List in order, most recent employer first)

Dates of Employment	Employer's Name, Address and Telephone Number	Rates of Pay		Supervisor's Name and Title	Reason for Leaving
		Start	Finish		
Describe in detail the work you did					

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Describe in detail the work you did

May the employers listed above be contacted? _____ If not, indicate which one(s) may not be contacted _____

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with Lewis County Head Start? _____

Occasionally the form of an application makes it difficult for an individual to adequately summarize his/her complete background. Please use the space below to summarize any additional information necessary to describe your full qualifications (e.g. – additional education and training, community involvement, extra-curricular activities, etc.).

Thank you for completing this application and for your interest in employment with Lewis County Head Start. Please be assured that your opportunity for employment will be given every consideration.

Applicant's Certification for Agreement
(Please read carefully)

I hereby certify that the facts set forth in this employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant

Reference Check
(For Office Use Only)

Source	Results of Reference Check

Interviewed? _____ Date? _____ Hour? _____

Result of Interview _____

Accepted for Employment? _____ Position _____

Starting Rate _____ Starting Date _____

Interviewed by _____

