



St. Lawrence County Industrial Development Agency

19 Commerce Lane ~ Suite 1 ~ Canton, New York 13617

Phone (315) 379-9806 / TDD: 711 Fax (315) 386-2573

APPLICATION FOR EMPLOYMENT

Job Application for:

(Name of Job Title for Which You Are Applying)

Date of Application:

Personal Information:

Name: Last, First, MI

Mailing Address:

City, State, Zip:

Physical Address:

City, State Zip:

Home Telephone Number:

Cell Phone Number:

Email Address:

Have you ever been convicted of a crime (felony or misdemeanor)?

YES

NO

If YES, please explain (use additional sheets, if necessary):

Are you a citizen of the United States?

YES

NO

If NO, provide the country of your citizenship:

If you prefer, a resume describing your work, educational background and any additional information may be used. However, if your resume does not provide the information requested in this application, you may lose consideration for the job.

Work Experience:

Describe your paid and nonpaid work experience related to the job for which you are applying. Do not attach job descriptions.

Job Title:

Dates Held:

Reason for Leaving Position:

Salary:

Employer's Name:

Employer's Address:

Supervisor's Name:

Supervisor's Telephone Number:

May We Contact?

YES

NO

Work Experience:

Describe your paid and nonpaid work experience related to the job for which you are applying. Do not attach job descriptions.

Job Title: _____

Dates Held: _____

Reason for Leaving Position: _____

Salary: _____

Employer's Name: _____

Employer's Address: _____

Supervisor's Name: _____

Supervisor's Telephone Number: _____

May We Contact? YES NO

Work Experience:

Describe your paid and nonpaid work experience related to the job for which you are applying. Do not attach job descriptions.

Job Title: _____

Dates Held: _____

Reason for Leaving Position: _____

Salary: _____

Employer's Name: _____

Employer's Address: _____

Supervisor's Name: _____

Supervisor's Telephone Number: _____

May We Contact? YES NO

Education:

Highest Level Completed: _____

Last High School: _____

City, State, Zip _____

Year Diploma or GED Received: _____

College/University Attended: _____

City, State, Zip _____

Degree (If any) _____

College/University Attended: _____

City, State, Zip _____

Degree (If any) _____

Declaration:

I declare, subject to the penalties of perjury, that the statements made in this application (including statements made in any accompanying papers) have been examined by me and to the best of my knowledge and belief are true and correct.

Date: _____

Signature: _____

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