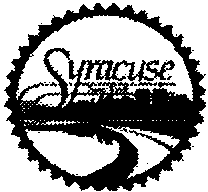
City of Syracuse

Ben Walsh, Mayor

**City of Syracuse **

**APPLICATION FOR EMPLOYMENT**

**MAIL OR DELIVER TO:**

Office of Personnel & Labor Relations • City Hall• 233 E. Washington Street • Rm 312• Syracuse, New York 13202-1476

The City of Syracuse affirmatively recruits, hires, and promotes without regard to age, marital status, race, creed, color, sex, religion, citizenship, national origin, disability, genetic predisposition or carrier status, pregnancy or sexual orientation; and actively employs Vietnam Era Veterans and disabled persons.

**PERSONAL DATA (Please Print)**

|  |  |  |  |
| --- | --- | --- | --- |
| Name (Last, First, Middle) | |  | |
| Address (Street) (Apt. No.) | | Are you a resident of the City of Syracuse?  0 Yes 0 No | |
| (City) (State) (Zip) | | E-Mail: | |
| Telephone: Home ( ) Business ( ) Cell ( ) | | | |
| U.S. Citizen? DYes DNo | If no, visa status | | Are you 18 years or older? DYes D No  If not please state age: |
| **EMPLOYMENT DATA** (Please check all that applies)  **Position(s) Applied For: Departments(s) Applied For:**  Laborer Assessment Neighborhood & Bus.Dev. Driver Aviation Parks & Rec. Janitor Budget Personnel  Administrative Dept. of Public Works Police Clerical Engineering Purchasing Technical Finance Research Secretarial Fire Water  Typing Speed Information Technology Other (list) Other (list) Law All  0 Regular Full Time 0 Summer 0 Part-Time | | | |
| If an operator's license is required for the job you have applied for, please indicate:  Type of Class Expiration Date I.D. # | | | |
| Have you previously been employed by the City of Syracuse? 0 Yes 0 No  If yes, when? Where? | | | |

U.S. **MILITARY SERVICE**

Have you ever been a member of the U.S. Military? If yes, please complete:

DYes ONo

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Branch | Entry Date | Discharge Date | Type of Discharge | Rank |
|  |  |

EDUCATIONAL RECORD \*Attach add1't.ionaI sheets 1'f more space IS needed.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Name of School | Location | Graduated yes/no | Degree  Received | Major | Degree  Date |
| High School |  |  |  |  |  |  |
| College |  |  |  |  |  |  |
| Graduate School |  |  |  |  |  |  |
| Vocational/Technical |  |  |  |  |  |  |
| Other |  |  |  |  |  |  |
| Do you have a license, certification, or other authorization to practice a trade or profession? Yes 0 No 0  If yes, please explain: | | | | | | |

WORK HISTORY (Start with most recent position) \*Attach additional sheets if more space is needed.

1 From To Position Rate of Pay Firm Address Hrs. Per Week Supervisor Duties

Reason For Leaving

2 From To Position Rate of Pay

Firm Address Hrs. Per Week Supervisor Duties

Reason For Leaving

3 From To Position Rate of Pay

Firm Address Hrs. Per Week Supervisor Duties

Reason For Leaving

BACKGROUND INVESTIGATION: Applicants may be required to undergo a criminal history background investigation. Failure to pass a background investigation may result in denial of employment. Pursuant to the Syracuse Fair Employment and Licensure Ordinance ("Ordinance"),

the City does not conduct criminal history background checks during the application process until after an applicant is deemed qualified for a position and such applicant has been extended a conditional offer of employment, with the exception of the following: 1.) positions in which the City is barred from hiring an individual with certain convictions; 2.) the Syracuse Police Department or any "police officer" and "peace officer" positions; and 3.) inquiries specifically authorized pursuant to applicable law. Pursuant to the Ordinance and New York State law, an applicant may not be denied employment because of a prior criminal record, unless there is a direct relationship between the offense and the employment sought or unless hiring would constitute an umeasonable risk.

DECLARATION: Ideclare that, subject to penalties of perjury, any statements made on or in connection with this application (including statements made in accompanying papers) have been examined by me and to the best of my knowledge are true and correct. Iunderstand that any deliberate misrepresentation or omission of facts may be cause for voiding this application or termination of employment, unless otherwise prohibited by law.

also understand that all statements made in connection with this application are subject to verification.

APPLICANT'SSIGNATURE

DATE

DEPARTMENT USE ONLY: IntervieWer:\_..,..;.... Date:- ..:.......-..,-\_Disposition: , ....;,....-----,..---- Additional Information: ,..:....... ..,....... .;........ ----------'------'------;..----'-'..,------'----