



**Western and  
Central New York**

# Employment Application

<b>PERSONAL</b>	Last Name			First	Middle	Date		
	Number & Street					Telephone No.		
	City			State		Zip Code		
	List three references (please list at least two business references from your present or prior employment)							
Name		Address		Company		Occupation	Phone No.	Yrs. Acquainted
Can you submit verification of your legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No					If under age 18, do you have working papers? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you been convicted of a criminal offense (felony/misdemeanor)? <input type="checkbox"/> Yes <input type="checkbox"/> No								
If yes, please explain _____ A conviction will not necessarily bar you from employment, unless it has a direct bearing upon the duties or responsibilities related to the position sought.								
Position Desired (1 <sup>st</sup> choice)		(2 <sup>nd</sup> choice)		Location Preferred (1 <sup>st</sup> choice)		(2 <sup>nd</sup> choice)		
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	Days and/or Hours Available			Salary Desired \$		Date Available To Work		
Are You Available To Work <input type="checkbox"/> Evenings <input type="checkbox"/> Holidays <input type="checkbox"/> Weekends <input type="checkbox"/> Overtime		Shift(s) Available <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 2 <sup>nd</sup> <input type="checkbox"/> 3 <sup>rd</sup>		If necessary, will you travel? <input type="checkbox"/> Yes <input type="checkbox"/> No Relocate? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Have you previously worked for AAA? (list dates, position, department and supervisor)					How were you referred to AAA? <input type="checkbox"/> Advertisement (source: _____) <input type="checkbox"/> Referral (by whom: _____) <input type="checkbox"/> Other (_____)			
Name and address of school			Major field of study		Check last year completed	Did You Graduate?	Diploma/Degree	
High School					<input type="checkbox"/> 9 <input type="checkbox"/> 11 <input type="checkbox"/> 10 <input type="checkbox"/> 12	<input type="checkbox"/> Yes <input type="checkbox"/> No		
College(s)/Junior College					<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Graduate School					<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Business/Technical School					<input type="checkbox"/> 1 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other								

**JOB INTEREST**

**EDUCATION**

**EEO Statement**

AAA Western and Central New York is an Equal Opportunity Employer and prohibits discrimination based on race, color, creed, religion, gender, marital status, age, national origin, disability, Veteran status, citizenship, or sexual orientation. We encourage and value workforce diversity.

**EMPLOYMENT HISTORY**

Please list all employment (including self-employment) starting with present or last employer first. Attach additional sheet if necessary.

From: Mo. Yr.	To: Mo. Yr.	Salary Start      End \$            \$	Company Name	Phone No.
Job Title – Department			Address	City      State      Zip Code
			<input type="checkbox"/> PT <input type="checkbox"/> FT	
Supervisor's Name & Title			Reason for Leaving	
Describe Job Duties				

From: Mo. Yr.	To: Mo. Yr.	Salary Start      End \$            \$	Company Name	Phone No.
Job Title – Department			Address	City      State      Zip Code
			<input type="checkbox"/> PT <input type="checkbox"/> FT	
Supervisor's Name & Title			Reason for Leaving	
Describe Job Duties				

From: Mo. Yr.	To: Mo. Yr.	Salary Start      End \$            \$	Company Name	Phone No.
Job Title – Department			Address	City      State      Zip Code
			<input type="checkbox"/> PT <input type="checkbox"/> FT	
Supervisor's Name & Title			Reason for Leaving	
Describe Job Duties				

From: Mo. Yr.	To: Mo. Yr.	Salary Start      End \$            \$	Company Name	Phone No.
Job Title – Department			Address	City      State      Zip Code
			<input type="checkbox"/> PT <input type="checkbox"/> FT	
Supervisor's Name & Title			Reason for Leaving	
Describe Job Duties				

Pleat list any licenses, skills, training, or accomplishments that you believe make you a qualified candidate for a position with AAA Western and Central New York.


If you are now employed, why do you want to change?	May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Have you ever been discharged or asked to resign? If so, please explain.

I hereby affirm that my answers to the foregoing questions are true and correct. I have not knowingly withheld any fact or circumstance, the disclosure of which might affect my application unfavorably, whether or not such circumstance was covered by a direct question. I understand that any misrepresentation or omission of facts on this application may be sufficient grounds to reject me as an applicant or, if hired, to terminate my employment.

I understand that any offer of employment, if such is made, may be withdrawn, with or without cause, and with or without prior notice, at any time, at the option of AAA Western and Central New York or myself. I understand that no representative of AAA Western and Central New York has any authority to enter into any agreement to employ me for any specified period of time; to assure any benefits, terms or conditions of employment; or to make any agreement contrary to the foregoing.

In the event of my employment by AAA, it is understood that my employment is for no stated term and is subject to termination at the will of AAA. I understand that this employment application is not to be construed as a guarantee of employment.

I agree to conform to the rules and regulations of AAA Western and Central New York and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by AAA Western and Central New York at any time, at their sole option, and without any prior notice to me.

**PRE-EMPLOYMENT STATEMENT**

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