



Village of Pleasantville  
80 Wheeler Avenue, Pleasantville, New York 10570  
(914) 769-1975

**Village of Pleasantville Application for Employment  
(An Equal Opportunity Employer)**

Date: \_\_\_\_\_

**Personal Information:**

Name: \_\_\_\_\_  
Last First Middle

Present Address: \_\_\_\_\_  
Street City State

Mailing Address (if different): \_\_\_\_\_  
Street City State

Are you 18 years or older? Yes No (state your age & DOB) \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you legally permitted to work in the United States? Yes No  
(Proof of lawful employment eligibility in the United States will be required upon employment in accordance with the Immigration Reform & Control Act of 1986)

**Employment Desired:**

Position: \_\_\_\_\_ State Date: \_\_\_\_\_

Are you employed now? Yes No  
If yes, can we inquire of your present employer? Yes No

Have you ever applied to the Village before? If yes, when? \_\_\_\_\_ Yes No

Have you ever worked for the Village before? Yes No



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**Education:**

School Level	Name & Location of School	No. of Yrs. Attended	Did you graduate	Subjects studied
Grammar School				
High School				
College				
Trade, Business, Correspondence School				

**General:**

Special training of skills useful to position sought: \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor? Yes    No    If yes, explain (include dates)  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been arrested for any crime that is currently pending against you? Yes    No    (if yes, please explain)  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been terminated/had employment disciplinary charges brought against you? Yes    No    (if yes, please explain)  
 \_\_\_\_\_  
 \_\_\_\_\_



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**Former Employers (List below last three employers, starting with last one first)**

1. Name and Address of Employer:

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Number of years with Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

May we contact Supervisor? Yes                      No

Name and title of Supervisor? \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Description of work: \_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

2. Name and Address of Employer:

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Number of years with Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

May we contact Supervisor? Yes                      No

Name and title of Supervisor? \_\_\_\_\_  
\_\_\_\_\_



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Phone Number: \_\_\_\_\_

Description of work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Name and Address of Employer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of years with Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

May we contact Supervisor? Yes                      No

Name and title of Supervisor? \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Description of work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Were you ever dismissed or discharged from any employment for reasons other than lack of work or funds? If yes, please provide specifics.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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**References: Give below the name of three persons not related to you whom you have known at least one year.**

<u>Name</u>	<u>Address and Phone</u>	<u>Business</u>	<u>Years Acquainted</u>

I certify that the facts and responses set forth in this application or otherwise made by me, are true and complete to the best of my knowledge and belief. I authorize the investigation of all statements contained in this application or otherwise made by me, as may be necessary in arriving at an employment decision. I understand that any false statements made by me constitute sufficient cause for rejection of the application or, if I am employed grounds for dismissal. I also understand that this application for employment is not a contract and is not intended to confer or create contractual rights for any kind of nature. If employed, employment is on at-will basis and may be terminated at any time and for any reason, except as provided by New York Civil Law and/or an applicable collective bargaining agreement. I hereby authorize the Village to contact prior employees to make inquiries and obtain information, including personnel files, relevant to my performance and abilities as an employee.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_