

Wayne County Human Resources

Employment/Civil Service Exam Application Charles A. Dye, Human Resource Director

Qualified: Yes No Conditional Reviewer's Initials	Position Applying For: Examination #			
Name:Last	First Middle			
Mailing Address:Street	City State Zip			
Social Security Number:				
Date of Birth if applying for Deputy/Police Officer or Correction Officer:				
Home Telephone number:	Work Telephone number:			
E-mail address:				
Have you been a resident of Wayne County for at least or	ne month? Yes No School District:			
An answer of YES to any of the following questions does not represent an automatic bar to employment. Each case is considered and evaluated in relation to the duties and responsibilities of the position for which you are applying. Were you ever convicted of any violation of law other than a minor traffic violation? Yes No Were you ever removed from any type of employment? Or resign rather than face dismissal? Yes No Were you ever discharged from the Armed Forces of the US which was other than "Honorable?" Yes No If you answered Yes to any of these questions, you may give specifics under "remarks" on page 3 of this application. If you elect not to provide specifics, however, if such explanation is insufficient you may be required to submit further information. Veteran Credits. If, for this examination you wish to claim additional credit as an Honorable discharge veteran, complete				
the appropriate section on the last page of this application. DD214 MUST be submitted before eligible list is established.				
Have you objection to this department making inquiry regarding your character and qualifications from: Your former employers? Yes No Your present employer? Yes No				
I declare that the statements made in this application (including statements made in my accompanying papers) have been examined by me and to the best of my knowledge and belief are true and accurate. Any false statements made may result in termination of employment. Applicants may also be required to undergo a State and national criminal history background investigation, which will include a fingerprint check, to determine suitability for appointment. Failure to meet the standards for the background investigation may result in disqualification.				
Signature	Date			

Are you a Citizen of the United States? Yes No If no, do you have a legal right to work in the U.S.? Yes No
Do you have a valid New York State Driver's License? Yes No If yes, what class
LICENSE/CERTIFICATE Do you have a license, certification or other authorization to practice a trade or profession? Yes No Name of Trade/Profession: License/Certificate Number; Licensed from: to:
EDUCATION
Have you received a High School Diploma? Yes N If no, have you received a General Equivalency Diploma (G.E.D.)? Yes No
Name of High School Check the highest grade completed 8 9 10 11 12
EDUCATION above high school level
Name of School Location (State) Course/Major Credits Completed Type of Degree Date Degree Received
TRAINING Other Training you received (i.e., work training programs, Armed Forces training). Please estimate training hours received.
Course/Program Hours
WORK EXPERIENCE Describe your employment, including military experience, beginning with your current and most recent employment. Submission of a resume does not relieve you of the responsibility for completing all sections of this application. The resume is a supplement to the application, and not a substitute for it. To receive credit for a job, basic employment information such as address, name and title of supervisor, average # of hours in the workweek, final salary, and reason for leaving, specific job duties, your job title, etc. must be shown. If you supervised, state how many people and nature of such supervision. Name & Address of current or most recent employer
Starting Date: Ending Date: Month/Year Month/Year
Salary: Hours worked per week:
Reason for leaving:
Your job title:
Immediate Supervisor's name: Title:Phone:
Description of duties:

g all sections of this application. The information such as address, name and	resume is a supplement to the appli- title of supervisor, average # of hor	cation, and not a substitute for it. urs in the workweek, final salary,
Ending Date:	26 4 87	_
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Ending Date:		_
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Hours worked per week:		
		
Title:	Phone:	
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	all sections of this application. The information such as address, name and job title, etc. must be shown. If you such that the shown is shown. If you such that the shown worked per week:	Hours worked per week:

PERSONAL PRIVACY PROTECTION LAW NOTIFICATION: The information which you are providing on this application is being requested pursuant to Section 50.3 of the NYS Civil Service Law for the principal purpose of determining the eligibility of applicants to participate in the examination for which they have applied. This information will be used in accordance with Section 96(1) of the Personal Privacy Protection Law, particularly subdivision (b)(e) and (f). Failure to provide this information may result in disapproval of the application. For further information, relating only to the Personal Privacy Protection Law, call (518)457-9375.

Remarks: