



This application is not an employment contract, but is intended to evaluate suitability for employment. It is the policy of the company to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under state and federal law. Once a job offer is made, employment may be contingent upon a successful completion of a medical examination. Which may include providing body substance samples.

Position desired	Date available	Wage/salary desired
Type of employment desired	Full time <input type="checkbox"/>	Part time <input type="checkbox"/>
Are you available to work	Holidays? Yes <input type="checkbox"/> No <input type="checkbox"/>	Temporary <input type="checkbox"/>
List hours available: Sat ___ to ___ Sun ___ to ___		
Mon ___ to ___ Tues ___ to ___ Wed ___ to ___ Thurs ___ to ___ Fri ___ to ___		

Personal Data

First name	Middle	Last
Day Time Phone	Evening Phone	
Current Street Address		
City/State/Zip		
Are you at least 18 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/>		

NOTE: Proof of employment eligibility is required under immigration regulation.

Have you ever been employed by any Streets of New York company?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, indicate name of company, location and dates:		

Education

Type of school	School Name & Location	Major	Degree, Diploma, Certificate or Credit
Grammar			
High School (or G.E.D.)			
College or University			
Business, Technical or Professional			
Other Applicable Course Work			

Job Related Skills (Please answer the following if the position you are applying for requires driving a motor vehicle)

Do you have a valid driver's license?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If Yes, Driver's license number and State of Issue:		
Have you been convicted of or pled guilty to any non traffic related offense within the past five years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you had your driver's license suspended or revoked or had your driving privileges modified by a court of law?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please list all states from which you hold or have held a driver's license.		
Please list any special skills you may have that relate to the position applied for.		

Please list the names and addresses of three professional references - persons NOT related to you.

1)

2)

3)

Employment History - Please list below your last three employers, beginning with the most recent.

Company May we contact? Yes No

Address Phone: ()

City/State/Zip

Name and Title of Immediate Supervisor

Your Title

Employed

Duties and scope of responsibility

Reason for leaving

Company May we contact? Yes No

Address Phone: ()

City/State/Zip

Name and Title of Immediate Supervisor

Your Title

Employed

Duties and scope of responsibility

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Company May we contact? Yes No

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Name and Title of Immediate Supervisor

Your Title

Employed

Duties and scope of responsibility

Reason for leaving

Applicant's Certification Agreement

1. I authorize the investigation of all statements contained in the application and release from all liability any persons or employers supplying such information, and I also release the Company from all liability which might result from making the investigation.

2. I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of facts on this application (or any required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

3. I agree, if I am offered and accept a position, to conform to all existing and future company rules and regulations and I understand that the Company reserves the right to change wages, hours and working conditions as deemed necessary. I also understand and agree that I may resign or be terminated, with or without cause, and with or without notice, at any time.

4. I understand that employment offer is contingent upon my providing, within three (3) working days of employment, valid proof of identity and eligibility to work, in order to comply with the Immigration Reform and Control Act of 1986.

5. As part of the qualification process, Streets of New York may collect personal information from persons or companies other than you or other individuals proposed for coverage, including credit reports, loss information, motor vehicle reports and other background information. This information, as well as other personal or privileged information subsequently collected by us, may in certain circumstances be disclosed to third parties without your authorization. You have a right of access and correction with respect to all personal information we collect. If you would like more detailed information in writing about our information collection practices, please let us know.

6. I have read and reviewed the information provided in this application and the above statements. By signing this application for employment I certify that I understand all parts of it and have answered all questions completely and fully.

Signature _____ Date _____