

# EMPLOYMENT APPLICATION

ALLEGANY COUNTY COMMUNITY OPPORTUNITIES AND RURAL DEVELOPMENT (ACCORD), INC.

We consider applicants for all positions on the basis of qualification without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, use of lawful products during non-work hours, or any other legally protected status.

## GENERAL INFORMATION

Name (Last)	(First)	(Middle Initial)	Telephone	
Present Address (Mailing Address)	(City)	(State)	(Zip)	Length of Residency
Previous Address (Mailing Address)	(City)	(State)	(Zip)	Length of Residency
E-Mail Address	Are you legally entitled to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No			

## POSITION

Position or Type of Employment Desired	Will Accept: <input type="checkbox"/> Part-Time <input type="checkbox"/> On-Call <input type="checkbox"/> Full -Time <input type="checkbox"/> Temporary
Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Salary Desired	Date Available
Have you ever worked for ACCORD before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide dates and position(s) held:	

## EMPLOYMENT RECORD

Please list the name(s) of your present and/or previous employer(s) in chronological order with present or most recent employer listed first. Be sure to account for all periods of time, including military service and any period of unemployment. If self-employed, provide company name and attach business references.

Employer	Telephone Number	From (Month/Year)
Address		To (Month/Year)
Specific Duties		Hours Per Week
		Last Salary
		Supervisor
Reason for Leaving		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Telephone Number	From (Month/Year)
Address		To (Month/Year)
Specific Duties		Hours Per Week
		Last Salary
		Supervisor
Reason for Leaving		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Telephone Number	From (Month/Year)
Address		To (Month/Year)
Specific Duties		Hours Per Week
		Last Salary
		Supervisor
Reason for Leaving		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	Telephone Number	From (Month/Year)
Address		To (Month/Year)
Specific Duties		Hours Per Week
		Last Salary
		Supervisor
Reason for Leaving		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

## EMPLOYMENT HISTORY

Have you ever been terminated or asked to resign from any job?

Yes

No

If yes, please explain the circumstances:

Please fully explain any gaps in your employment record:

May we contact your current employer?

Yes

No

If no, please explain:

Please indicate any actual experience, special training, and qualification that you have which you feel are relevant to the position you are applying for:

Have you ever used another name?

Yes

No

If yes, please provide the other name(s) that you have used:

Is there any additional information relative to a name change, use of an assumed name, or use of a nickname necessary to verify your employment and/or educational record(s)?  Yes  No

If yes, please explain:

If hired, can you provide proof that you are over 18 years of age?

Yes

No

Are you capable of satisfactorily performing the essential job duties required of the position that you are applying for?  Yes  No

If no, are there any reasonable accommodations that can be made to allow you to perform the essential functions of the job?

Do you have adequate transportation to and from work?

Yes

No

Please state any additional information that you feel may be helpful to us in considering your application:

## EDUCATION

	Years Completed	Diploma / Degree	Course / Major	Specialized Training / Experience / Skills / Extra-Curricular Activities
Elementary:	<input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8			
High School:	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12			
College / University:	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			
Graduate / Professional:	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			
Trade / Correspondence:				

## PERSONAL REFERENCES

Please list the persons who know you well. **DO NOT** include previous employers or relatives.

Name	Occupation	Address (Street, City, State)	Telephone Number	Number of Years Known

## CERTIFICATION OF INFORMATION

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF **THIRTY (30) DAYS**. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements are reported on this application may be considered sufficient cause for dismissal.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

## APPLICANT'S STATEMENT AND AGREEMENT

In the event of my employment to a position at Allegany County Community Opportunities and Rural Development (ACCORD), Inc., I will comply with all rules and regulations of said Corporation. I also understand that any offer of employment may be contingent upon the passing of a physical examination. I consent to the disclosure of the results of any physical examination and related tests to Allegany County Community Opportunities and Rural Development (ACCORD), Inc. I understand that should I decline to sign this consent or decline to take any tests required by said Corporation for employment purposes, my application for employment may be rejected or my employment may be terminated.

I understand that Allegany County Community Opportunities and Rural Development (ACCORD), Inc. may investigate my driving record and my criminal record, and may conduct a background check on me through the NYS Central Register on Child Abuse and Maltreatment. I also understand that an investigative consumer report may be prepared whereby information is obtained through personal interviews with my neighbors, friends, personal references, and others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written inquiry within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I further understand that Allegany County Community Opportunities and Rural Development (ACCORD), Inc. may contact my previous employers and I hereby authorize those employers to disclose to Allegany County Community Opportunities and Rural Development (ACCORD), Inc. all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees and representatives, as well as other individuals who release information to Allegany County Community Opportunities and Rural Development (ACCORD), Inc.; and hereby release said employers and individuals from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I further hereby authorize the persons named herein as personal references to provide Allegany County Community Opportunities and Rural Development (ACCORD), Inc. with any pertinent information that they may have regarding myself.

I hereby state that all of the information that I provided in this application, including any other documents filed in connection with my employment, including interviews, is true and correct. I have not withheld any information that would, if disclosed, affect my employment application unfavorably. I understand that I become employed by Allegany County Community Opportunities and Rural Development (ACCORD), Inc. and any such information is later found to be false or incomplete in any respect, I may be dismissed. I also understand that if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.

**If hired, I agree as follows:**

**My employment and compensation is terminable at-will; is for no definite period of time; and may be terminated by Allegany County Community Opportunities and Rural Development (ACCORD), Inc. at any time and for any reason whatsoever, with or without good cause at the option of either Allegany County Community Opportunities and Rural Development (ACCORD), Inc. or myself. No implied, verbal, or written agreements contrary to the express language of this Agreement are valid unless they are in writing and signed by the Executive Director of Allegany County Community Opportunities and Rural Development (ACCORD), Inc. No supervisor or representative of Allegany County Community Opportunities and Rural Development (ACCORD), Inc., other than the Executive Director, has any authority to make any agreements contrary to the foregoing. This Agreement is the entire agreement between Allegany County Community Opportunities and Rural Development (ACCORD), Inc. and myself regarding the rights of Allegany County Community Opportunities and Rural Development (ACCORD), Inc. or myself to terminate employment with or without good cause; and this Agreement takes the place of all prior and contemporaneous agreements, representations, and understandings of myself and Allegany County Community Opportunities and Rural Development (ACCORD), Inc.**

*If you have any questions regarding this Statement and Agreement, please contact the Director of Human Resources or another Allegany County Community Opportunities and Rural Development (ACCORD), Inc. representative before signing.*

I hereby acknowledge that I have read the above statements and understand the same.

**\*\* DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT AND AGREEMENT \*\***

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SIGNATURE OF APPLICANT

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DATE