



ONONDAGA EMPLOYEE LEASING

APPLICATION FOR EMPLOYMENT

We appreciate your interest in our organization and are sincerely interested in your background and qualifications. Please answer all questions as thoroughly as possible so we may review this information in consideration of employment within our organization. We consider all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, arrest or conviction or any other legally protected status.

PERSONAL

Name _____ Telephone # _____
Last First MI

Address _____ Social Security # _____
No. Street City State Zip

Are you legally eligible for employment in the U.S.A.? Yes No Are you 18 years or older? Yes No

Position(s) applied for _____ Rate of pay expected \$ _____ /wk.

Are you employed now? Yes No If your application is considered favorably what date will you be available to work _____

Would you work Full-time or Part-time? If PT specify hours/days available _____

Were you previously employed by us? Yes No. If yes, when? _____

In case of an emergency, contact _____ Phone# _____

PLEASE READ THE FOLLOWING AND SIGN BELOW

I certify that the facts contained in this application are true and complete to the best of my knowledge. I also authorize O.E.L.S. to investigate all the statements in this application and authorize my former employers to furnish all information pertaining to my work record. I also release my former employers from any liability on account of furnishing any information to O.E.L.S. I understand that, if employed, falsified statements, omissions or misleading statements on this application shall be grounds for dismissal and O.E.L.S. shall not be held liable in any way if my employment is terminated because of falsified, omissions or misleading statements. I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time without any prior notice.

I understand, if hired, I will be employed by Onondaga Employee Leasing and leased to _____

REFERENCES

Give the names of three persons not related to you whom you have known at least one year.

NAME	ADDRESS	PHONE#	OCCUPATION	YRS. KNOWN

Applicant Signature _____ Date _____

EMPLOYMENT HISTORY

Begin with your present or last job. Include any military service and volunteer activities. (Exclude groups which indicate race, color, religion, sex, or national origin.)

Employer	Dates Employed	Job Duties
Address		
Hourly Rate/Salary		
Job Title	Reason for Leaving	
Immediate Supervisor	Telephone #	
Employer	Dates Employed	Job Duties
Address		
Hourly Rate/Salary		
Job Title	Reason for Leaving	
Immediate Supervisor	Telephone #	
Employer	Dates Employed	Job Duties
Address		
Hourly Rate/Salary		
Job Title	Reason for Leaving	
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EDUCATION

High School & Location _____ Did You Graduate? Yes No

University/College & Location _____ Major/Degree _____

Business/Trade/Other & Location _____ Major/Degree _____

Subjects or job related skills from employment or other experiences _____

MILITARY SERVICE

Branch: _____ Years Served: _____ Rank: _____

Americans With Disabilities Act Clarification. For the position you have applied, the job description was explained with the essential job functions. With or without reasonable accommodation, can you perform the essential job functions for the position you have applied for? Yes No.

FOR OFFICE USE ONLY:

CLIENT NAME _____

HIRE DATE: _____

RATE OF PAY: _____