

Comprehensive Support Services, LLC  
45 Pine Grove Avenue  
Kingston, NY 12401 845-340-4500

### APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law. Equal access to employment, services and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant name: \_\_\_\_\_ Date: \_\_\_\_\_

Position applied for or type of work desired: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone # \_\_\_\_\_ Alternative # \_\_\_\_\_

Type of Employment desired: \_\_\_full-time \_\_\_ part-time \_\_\_per diem \_\_\_temporary

Date you will be available to start work: \_\_\_\_\_

Are you able to meet the attendance requirements? \_\_\_yes \_\_\_no

Do you have any objection to working overtime if necessary: \_\_\_yes \_\_\_no

Can you travel if required for this position? \_\_\_yes \_\_\_no

Have you ever been previously employed by our organization? \_\_\_yes \_\_\_no

Can you submit proof of legal employment authorization and identity? \_\_\_yes \_\_\_no

If you are under 18, can you furnish a work permit? \_\_\_yes \_\_\_no

Have you ever been convicted of a misdemeanor or felony? \_\_\_yes \_\_\_no

If yes, explain (a conviction will not automatically bar employment) \_\_\_\_\_

Drivers license number (if driving is an essential job duty): \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

**Employment History**

Please provide all employment information for your past four employers starting with the most recent. You can attach a resume.

*May we contact this employer: Yes \_\_\_\_\_ No \_\_\_\_\_*

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor & title: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary \_\_\_\_\_

Job summary: \_\_\_\_\_

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

*May we contact this employer: Yes \_\_\_\_\_ No \_\_\_\_\_*

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor & title: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary \_\_\_\_\_

Job summary: \_\_\_\_\_

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

*May we contact this employer: Yes \_\_\_\_\_ No \_\_\_\_\_*

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor & title: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary \_\_\_\_\_

Job summary: \_\_\_\_\_

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

**Employment History**

May we contact this employer: Yes \_\_\_\_\_ No \_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor & title: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary \_\_\_\_\_

Job summary: \_\_\_\_\_

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

**Other skills and Qualifications**

Summarize any job-related training, skills, licenses, certificates and/or other qualifications:

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

**Educational History**

List school name and location, years completed, course of study and any degrees earned:

High school: \_\_\_\_\_

College: \_\_\_\_\_

Technical training: \_\_\_\_\_

Other: \_\_\_\_\_

**References**

List 3 references names, telephone numbers and years known (do not include relatives or employers):

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

I hereby authorize the potential employer to contact, obtain and verify the accuracy of information contained in this application from all previous employers, educational institutions and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specific length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I see employment under these conditions.

Applicant  
signature \_\_\_\_\_ Date \_\_\_\_\_