

# Dutchess County Summer Camp 2021 Application

<b>Title of Position:</b> _____	<b>For Dutchess County HR Use Only</b> Approved _____ Conditional _____ Disapproved _____
<b>Municipality:</b> _____	

1. Social Security Number: _____ - _____ - _____	3. If you are under 18 years of age, can you provide proof of eligibility to work? Yes _____ No _____	
2. _____ Last Name, First Name, Initial		4. <b>If the position you are applying for has minimum or maximum age limits (see job description), please enter your date of birth:</b> Month _____ Day _____ Year _____
Address _____		
City _____ State _____ Zip Code _____		
Day Phone _____ Evening Phone _____		
5. Are you currently a U.S. citizen? Yes _____ No _____ If "No", please give alien registration number: _____		

6. **CERTIFICATIONS/LICENSES: (\*Attach a copy of your certification/license to this application.)**

Title/Issuing Authority	License #	Original Date of Issue	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____

Do you possess a valid license to operate a motor vehicle in New York? Yes \_\_\_\_\_ (Class \_\_\_\_\_) No \_\_\_\_\_

7. **EDUCATION:**

**High School:** Do you possess a high school or equivalency diploma? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, last grade completed: \_\_\_\_\_  
Name of High School \_\_\_\_\_

College:	Name/Location	Dates Attended	Major	# of Credits	Degree Earned
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

8. **WORK EXPERIENCE: (Attach additional sheets if necessary.)**

<b>Name of Employer/Address</b> _____	<b>Title</b> _____
<b>Dates of Employment (From Mo/Yr) _____ (To Mo/Yr) _____</b>	<b># of hours/wk</b> _____ <b>Supervisor</b> _____
<b>Duties Performed:</b> _____	
_____	
<b>Name of Employer/Address</b> _____	<b>Title</b> _____
<b>Dates of Employment (From Mo/Yr) _____ (To Mo/Yr) _____</b>	<b># of hours/wk</b> _____ <b>Supervisor</b> _____
<b>Duties Performed:</b> _____	
_____	

### Affirmation and Authorization to Investigate and Release

The undersigned applicant hereby affirms that the statements made on this application and any attached papers or documents are true under the penalties of disqualification and perjury.

The undersigned applicant hereby authorizes the Department of Human Resources of the County of Dutchess or its agents to investigate matters necessary for the verification of the qualifications of the applicant. Such authorization shall include the right to examine any and all records, files, histories or other information relating to the applicant in the possession of any federal, state or municipal authority, corporation, agent or person. Furthermore, such investigation may include a criminal background investigation, which would require a fingerprint check, to determine overall suitability for employment. Failure to meet standards for the background investigation may result in disqualification. The applicant voluntarily releases from liability all persons or entities supplying or collecting such information.

\_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_