



Please Print Clearly

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer. Applicants are considered for positions without regard to race, religion, sex, national origin, age, disability, or any other category protected federal, state, or local laws.

THIS CORPORATION IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE CORPORATION MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Please Answer All Questions. Resumes Are Not A Substitute For A Completed Application.

Position Applied For: _____ Date of Application: _____

Name: _____
(Last, First, MI)

Present Address: _____

City: _____ State: _____ Zip Code: _____

Primary Phone: (_____) _____ - _____ Alternate Phone: (_____) _____ - _____

Previous Address(es) in the last seven (7) years: _____

Email: _____

Applying for: Full-time Part-time Pier-diem Desired Salary/Hourly Rate: _____

Are you willing to work overtime? Yes No Date you are able to start: _____

INSTRUCTIONS FOR ANSWERING THE FOLLOWING TWO QUESTIONS:

All pending arrests or criminal accusations must be disclosed. You are not required to disclose arrests or criminal accusations that resulted in criminal actions or proceedings which were terminated in your favor. Do not disclose criminal actions or proceedings that were sealed or classified as youthful offender adjudications. An ex-offender who is denied employment may, upon written request, receive a statement of the reason(s) for denial within thirty (30) days of the applicant's request for such information.

Have you ever plead guilty or no contest to, or been convicted of any criminal offense other than the applicable exceptions listed above? Yes No

Have you ever been arrested for any matters for which you currently are out on bail or on your own recognizance pending trial or hearing? Yes No

CRIMINAL OFFENSES ONLY: If you answered "Yes" to either of the above questions, please provide the date(s) and explain in accordance with the above instructions so that individual circumstances can be considered.

Criminal convictions or arrests will not automatically disqualify an applicant from a particular job. The Corporation will consider the nature of the crime, its seriousness, the substantial relation to the position's functions and qualifications, the number of occurrences, the applicant's age at the time of the crime, the time elapsed since the crime, the applicant's entire work and educational history, employment references and recommendations, and the business necessity of any exclusion when required by law.

Have you ever been investigated for, a party to an investigation of, or convicted of Medicare, Medicaid, or other insurance fraud? Yes No

Have you ever been subject to investigation by, discipline, or other action by any licensing or certifying authority?
Yes No

If you answered "Yes" to either of the above questions, please provide the date(s) and explain in accordance with the above instructions so that individual circumstances can be considered.

Have you ever initiated an act of violence in the workplace? Yes No

If yes, please provide the date(s) and explain so that individual circumstances can be considered. (A "Yes" answer will not necessarily disqualify you from employment.)

Educational Experience:

If applicable, list below any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

Education	School Name and Location (Address, City, State)	Course of Study	Graduate?	# of Years Completed	Degree/Major
High School					
College					
Bus./Tech./Trade or Post College					

Please list all special technical skills that you feel qualify you for the job for which you are applying (For example, computer software, equipment operations, languages, etc.)

Please list all relevant licenses and certifications held by you that you feel qualify you for the job for which you are applying, including the name of the issuing agency, license of certification number, and date of expiration if applicable.

Please list any other educational experience you feel qualify you for the job for which you are applying.

WORK EXPERIENCE:

Please list the names of your present and/or previous employers in chronological order with present or last employer listed first. Account for all periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment.

Employer:					Address:					
Telephone:	()				Dates of Employment -	From:			To:	
Job Title:					Duties:					
Supervisor's Name:							Telephone:	()		
May we contact your supervisor?	<input type="checkbox"/>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	If "No", Why Not?				
Wages at Start:	\$				Wages at End:	\$				
Reason for leaving:										
How much notice did you give when you left?										
What will your employer say was the reason you left?										

Employer:					Address:					
Telephone:	()				Dates of Employment -	From:			To:	
Job Title:					Duties:					
Supervisor's Name:							Telephone:	()		
May we contact your supervisor?	<input type="checkbox"/>	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	If "No", Why Not?				
Wages at Start:	\$				Wages at End:	\$				
Reason for leaving:										
How much notice did you give when you left?										
What will your employer say was the reason you left?										

Employer:		Address:			
Telephone:	()	Dates of Employment -	From:		To:
Job Title:		Duties:			
Supervisor's Name:				Telephone:	()
May we contact your supervisor?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	If "No", Why Not?
Wages at Start:	\$		Wages at End:	\$	
Reason for leaving:					
How much notice did you give when you left?					
What will your employer say was the reason you left?					

Please explain fully all gaps in your employment history in excess of one month: _____

Have you ever been terminated or asked to resign from any job? Yes No

Have you ever been given the choice to resign rather than be terminated? Yes No

Has your employment ever been terminated by mutual agreement? Yes No

If you answered Yes to any of the above three questions, please explain the circumstances of each occasion. _____

References:

Please list the names of two additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer related references.

NAME	POSITION/TITLE	COMPANY	RELATIONSHIP (i.e., supervisor, co-worker)	TELEPHONE

Please list the names of three personal references we may contact. (Not previous employers or relatives)

NAME	OCCUPATION	ADDRESS	TELEPHONE	# OF YEARS KNOWN

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid New York State driver's license, a driving record rated as Clear or Acceptable under Canandaigua Emergency Squad Motor Vehicle Record policy, and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Corporation has a drug-free workplace and drug and alcohol testing program consistent with applicable federal, state, and local law. If I am offered a conditional offer of employment, I understand that if a pre-employment (postoffer) drug or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Corporation's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Corporation's policies and applicable federal, state, and local law.

If employed by the Corporation, I understand and agree that the Corporation, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign confidentiality, restrictive covenant, and/or conflict of interest statement, as well as an agreement to arbitrate.

I certify that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

THIS CORPORATION IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE CORPORATION MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE CORPORATION IS AUTHORIZED TO ENTER INTO AN AGREEMENT—EXPRESS OR IMPLIED—WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE CHAIRMAN OF THE BOARD OF DIRECTORS.

IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE CORPORATION, AND I UNDERSTAND THAT THE CORPORATION HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Corporation or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Corporation or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Corporation and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by this Corporation, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Corporation. I also understand this Corporation employs only individuals who are legally eligible to work in the United States.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

Applicant Signature: _____

Date: _____

(Revised 1-2022)