



68 CEMETERY AVENUE
ALBANY, NY 12204
P: 518-463-7017

EMPLOYEE APPLICANT INFORMATION

Last Name		First		M.I.		Date	
Street Address				Apartment/Unit #			
City			State			ZIP	
Phone			E-mail Address				
Date Available				Desired Salary			
Position Applied for							
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		

Name of an emergency contact person:

Address and telephone number of emergency contact person:

Do you know any employees at Albany Rural Cemetery:

Have you been previously employed with Albany Rural Cemetery: Are you over the age of 18:

EDUCATION

High School			Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College			Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Other			Address				
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		

REFERENCES

Please list three references not related to you:

Full Name			Relationship				
Company			Phone				
Address							
Full Name			Relationship				
Company			Phone				
Address							
Full Name			Relationship				
Company			Phone				
Address							

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous employer for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous employer for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

HOW DID YOU HEAR ABOUT THIS EMPLOYMENT OPPORTUNITY?

<input type="checkbox"/> Referral
<input type="checkbox"/> LinkedIn
<input type="checkbox"/> Newspaper
<input type="checkbox"/> Return Employee

Do you have any specific skills or experience related to the job?

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MILITARY SERVICE

Branch	From:	To:
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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