



St. Lawrence County: 156 Center Street Massena, NY 13662
Ph: (315) 764-9442 **Fx:** (315) 764-9464

Franklin County: 3372 St. Rt. 11, Ste D, Malone, NY 12953
Ph: (518) 483-2151 **Fx:** (518) 483-7491

Jefferson & Lewis Counties: 120 Washington St., Ste 430, Watertown, NY 13601
Ph: (315) 764-9442 **Fx:** (315) 405-4991

EMPLOYMENT APPLICATION

IF YOU REQUIRE ANY ACCOMODATION(S) DURING THE APPLICATION PROCESS, PLEASE INFORM THE DEPUTY DIRECTOR FOR ASSISTANCE

MILC is an Equal Opportunity Employer. All applicants are considered for employment without regard to race, creed, color, sexual orientation, religion, gender, age, marital status, veteran status, national origin, citizen status, disability, and any other protected groups.

Please fill out the application fully. If an item does not apply, write "N/A." Attaching a resume to the application will not be considered as filling out the application in full.

Name: _____ Date: _____

Address: _____

Contact Phone(s): (H): _____ (C): _____

Email: _____

Other Names or Aliases you have used: _____

Date Available to Start Work: _____

Will you need to provide your current employer with a two-week notice? _____

How did you hear about the position you are applying for? _____

Position you are applying for: _____

Are you 18 Years of age or older? YES NO

If NO, do you have a work permit? YES NO

Do you have a current valid NYS Driver's License? YES NO

Can you travel if required by this position? YES NO



St. Lawrence County: 156 Center Street Massena, NY 13662
Ph: (315) 764-9442 **Fx:** (315) 764-9464

Franklin County: 3372 St. Rt. 11, Ste D, Malone, NY 12953
Ph: (518) 483-2151 **Fx:** (518) 483-7491

Jefferson & Lewis Counties: 120 Washington St., Ste 430, Watertown, NY 13601
Ph: (315) 764-9442 **Fx:** (315) 405-4991

Education

	Name, City & State	Area of Study	Did you graduate?	Last Year Completed	Degree
High School					
College(s)					
Graduate School(s)					
Other					

Military

If you served in the US Armed Forces, please complete the following:

Branch of Service: _____

Skills/Training: _____

Dates of Active Duty: From: _____ To: _____

Rank at Discharge: _____

References

Please list 3 Professional References (no family)

Name	Relationship	Address	Telephone



St. Lawrence County: 156 Center Street Massena, NY 13662
Ph: (315) 764-9442 **Fx:** (315) 764-9464

Franklin County: 3372 St. Rt. 11, Ste D, Malone, NY 12953
Ph: (518) 483-2151 **Fx:** (518) 483-7491

Jefferson & Lewis Counties: 120 Washington St., Ste 430, Watertown, NY 13601
Ph: (315) 764-9442 **Fx:** (315) 405-4991

Employment History

Please list the last 4 employment positions held, starting with your current employment. Do not omit any employers. Attach a resume to provide additional relevant employment information, special programs, promotions, activities, training certificates, and job duties..

Company:	Phone:
Address:	Employed From: To:
Immediate Supervisor Name and Title:	Reason For Leaving, or desire to change jobs?:
Your Job Title and Functions:	Ending Salary: May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO If No, please explain: _____ _____ _____ _____ _____

Company:	Phone:
Address:	Employed From: To:
Immediate Supervisor Name and Title:	Reason For Leaving:
Your Job Title and Functions:	Ending Salary: May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO If No, please explain: _____ _____ _____ _____ _____



St. Lawrence County: 156 Center Street Massena, NY 13662

Ph: (315) 764-9442 **Fx:** (315) 764-9464

Franklin County: 3372 St. Rt. 11, Ste D Malone, NY 12953

Ph: (518) 483-2151 **Fx:** (518) 483-7491

Jefferson & Lewis Counties: 120 Washington St., Ste 430, Watertown, NY 13601

Ph: (315) 764-9442 **Fx:** (315) 405-4991

Company:	Phone:
Address:	Employed From: To:
Immediate Supervisor Name and Title:	Reason For Leaving:
Your Job Title and Functions:	Ending Salary: May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO If No, please explain: _____ _____ _____ _____ _____

Company:	Phone:
Address:	Employed From: To:
Immediate Supervisor Name and Title:	Reason For Leaving:
Your Job Title and Functions:	Ending Salary: May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO If No, please explain: _____ _____ _____ _____ _____

