

EMPLOYMENT APPLICATION

You must complete all pages of this application even if you will be attaching a resume.

Name: _						
Address	:				Apartment #	
City:			State:	Zip: _		
Home Pl	hone:		Work Phone:			
Email:						
	•		e to communicate		,	
	Have you ever been e If yes, when			Chenango or He	ad Start?	
*	Date available to beg	in employmer	nt:			
* /	Are you related to any If yes, provide names	current Opp of relatives:	ortunities for Cher	ango board me	mbers?	
	Are you related to any If yes, provide names				Start employees?	
*	Are you a current Hea	ad Start parer	nt?			
*	Are you a former Hea	d Start stude	nt?			
*	Have you ever been o	convicted of a	felony?			
	Our Agency requires Please initial to verify				lder for employment.	
					19. Fully vaccinated means you is requirement?	ı ha
	l you hear about the DL Word of Mou		Site Indee	dFaceb	ookOther	
• • • • • • • • •	interested in					

SPECIAL SKILLS

Fore	eign Language/S	pecify Language				
Prof	ficiency level	Beginner	Intermediate	Ad	vanced	
Driv	ver's License					
Oth	er Licenses/Certi	fications				
СРГ	R/FIRST AID CEI	RTIFIED?	_			_
MA	T CERTIFIED?		_			
COMPUTE						
Wor	rd Processing					
Data	a Base					
Spre	eadsheet					
Key	boarding (words	per minute)				-
E-m	nail (level)	Beginning	Interm	ediate Ad	vanced	
Inte	rnet (level)	Beginning	Interm	ediate Ad	vanced	
Oth	er					
EDUCATIO	N					
Doy	you have a high s	school diploma or (GED certificate? YE	S NO		
Circ	le highest grade	completed in scho	ol: 9 10 11	12		
List	requirements	s of the job. Please	, Business or other so e attach copies of all applications require tra	transcripts and/or dip	t enough educati blomas you wish	on to meet the to be considered for
Nan	ne & Location of	School Course o	f Study Credits Ear	ned Dates Attende	d Graduated	Degree

CHENANGO COUNTY | 44 W MAIN ST, NORWICH NY 13815 | P: 607.334.7114 | F: 607.336.6958 CHENANGO COUNTY | 44 W MAIN ST, NORWICH NY 13815 | P: 607.334.7114 | F: 607.336.6958 BROOME COUNTY | 5 W STATE ST, BINGHAMTON NY 13901 | P: 607.723.6493 | F: 607.723.6497 Greaterops.org



WORK EXPERIENCE

(If work history includes educational environments include age range of children)

and Address of Employer:		Supervisor's Name & Telephone:
itle:	_	Your Duties:
Mo. & Yr. To: Mo. & Yr.		
ime: Hours per week:		
Months: e contact this employer?	Reason	for Leaving:
and Address of Employer:		Supervisor's Name & Telephone:
itle:		Your Duties:
Mo. & Yr. To: Mo. & Yr.		
ime: Hours per week:		
Months: e contact this employer?	Reason	for Leaving:
and Address of Employer:		Supervisor's Name & Telephone:
itle:		Your Duties:
		2:

BROOME COUNTY | 5 W STATE ST, BINGHAMTON NY 13901 | P: 607.723.6493 | F: 607.723.6497

terops.org

	er week:		
Years: Months:	Rea	ason for Leaving:	
May we contact this employe	»r?		
Name and Address of Emp	loyer:	Supervisor's Name & Telephone:	
Your Title:		Your Duties:	
From: Mo. & Yr. To: Mo. &	Vr		
Total Time: Hours pe	er week:		
Years: Months:	Rea	ason for Leaving:	
May we contact this employe	∋r?		
		AL and 1 PERSONAL) other than family mem racter, and personality. Complete this section	
Name	Relationship	Telephone	
Name	Relationship	Telephone	_
Name	Relationship	Telephone	_
Name	Relationship	Telephone	_
Name	Relationship	Telephone	
Name	Relationship	Telephone	_
Name	· · · · · · · · · · · · · · · · · · ·		_

CHENANGO COUNTY | 44 W MAIN ST, NORWICH NY 13815 | P: 607.334.7114 | F: 607.336.6958 CHENANGO COUNTY | 44 W MAIN ST, NORWICH NY 13815 | P: 607.334.7114 | F: 607.336.6958 BROOME COUNTY | 5 W STATE ST, BINGHAMTON NY 13901 | P: 607.723.6493 | F: 607.723.6497 CHARTERED MEMBER



SUPERVISORY EXPERIENCES

List any supervisory experience you have including where and how many years.

VOLUNTEER EXPERIENCE and COMMUNITY ACTIVITIES

Name & Address of Organization	Supervisor's Name & Phone
Your Title From: Mo. & Yr. To: Mo & Yr.	
otal Time rears Months Hours per week lame & Address of Organization	Supervisor's Name & Phone
our Title	
rom: Mo. & Yr. To: Mo & Yr.	
Years Months Hours per week	

ADDITIONAL INFORMATION

Explain your expectation of working for a non-profit agency and also please provide any additional information you wish to include on your application.

CHENANGO COUNTY | 44 W MAIN ST, NORWICH NY 13815 | P: 607.334.7114 | F: 607.336.6958 BROOME COUNTY | 5 W STATE ST, BINGHAMTON NY 13901 | P: 607.723.6493 | F: 607.723.6497



An EEO Employer

Greater Opportunities, Inc. is an equal opportunity employer. Our agency does not discriminate on the basis of age, race, religion, color, sex, national origin, marital status, physical or mental disability, arrest record, or any other protected classification.

- 1. I understand that documentation of employment eligibility for compliance with the U.S. Immigration Control and Reform Act is required at the time of hire.
- 2. I understand that enrollment in the Child Care Division – Criminal History Registry is required at time of hire.
- 3. I understand that employment with GO Head Start is contingent upon final approval by the Head Start Policy Council.
- 4. I certify that the information contained in this application is correct to the best of my knowledge, and I understand that falsifications and/or omissions in any detail are grounds for disgualification from consideration for employment or if hired for dismissal from employment.

5. Greater Opportunities, Inc is an at-will employer;

"The Employee and employer are each free to terminate the employment relationship with or without cause and with or without notice."

Signature of Applicant

Date

I understand that consideration for employment is contingent on the results of a reference and background check. I authorize Greater Opportunities, Inc. to investigate the truthfulness of all statements made on this application and to contact my former employers, other listed references or any other persons who can verify information. "I hereby consent to permit Greater Opportunities, Inc to contact anyone it deems appropriate to investigate or verify any information provided by me to discuss my suitability for employment, background, past performance, education or related matters. I expressly give my consent to any discussions regarding the foregoing and I voluntarily and knowingly waive all rights to bring an action for defamation, invasion of privacy, or similar cause of action, against anyone proving such information.

Signature of Applicant

Date

CHENANGO COUNTY | 44 W MAIN ST, NORWICH NY 13815 | P: 607.334.7114 | F: 607.336.6958 BROOME COUNTY | 5 W STATE ST, BINGHAMTON NY 13901 | P: 607.723.6493 | F: 607.723.6497

