



## Application for Employment

Today's Date \_\_\_\_\_

**Personal Information**

Cell Phone #: \_\_\_\_\_

Name \_\_\_\_\_  
 (Last) (First) (Middle) Email Address: \_\_\_\_\_

Address \_\_\_\_\_  
 (Street) (City) (State) (Zip Code)

Are you 18 years of age or older? Yes  No

Are you legally eligible to work in the United States? Yes  No

Have you ever previously been employed by this Company? Yes  No  If yes, when? \_\_\_\_\_

Do you now or have you ever had a relative employed by this Company? Yes  No

If yes, who? \_\_\_\_\_

Have you ever been arrested or convicted of a crime that has not been expunged by a court?

Yes  No  If yes, please explain. \_\_\_\_\_

\*Candidates selected for probable employment who are age 18 or older may be required to consent to a background check as a condition of employment.

**Employment Desired**

Position Desired: \_\_\_\_\_ Date Available to Work: \_\_\_\_\_  
 (Please list the title of the position as posted and do not leave blank or list "any.")

Status Desired: Full-time  Part-time  Desired Hourly Rate/Base Salary: \_\_\_\_\_

**Are you available to work:**

Weekday/daytime hours? Yes  No  Weekday/evening hours? Yes  No

Saturday? Yes  No

Are you currently employed? Yes  No

If so, may we contact your present employer? Yes  No

Educational Information	Name and Location of School	# of years attended	Degree Received	Subjects Studied/Major
High School				
College or University				
Other (Technical/Trade School, Business School/Other)				

APPLICANT'S PRINTED NAME: \_\_\_\_\_

**Employment History:** Include your last three positions of employment, including periods of unemployment, starting with the most recent and working backwards in time. Attach additional sheets of paper if needed. *Incomplete information could disqualify you from further consideration.*

From: \_\_\_\_\_ To: \_\_\_\_\_  
(Month/Year) (Month/Year)

Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Position/Title: \_\_\_\_\_ Part-time  Full-time

Briefly Describe Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_

Supervisor's Name/Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_  
(Month/Year) (Month/Year)

Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Position/Title: \_\_\_\_\_ Part-time  Full-time

Briefly Describe Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_

Supervisor's Name/Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_  
(Month/Year) (Month/Year)

Employer's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Position/Title: \_\_\_\_\_ Part-time  Full-time

Briefly Describe Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_

Supervisor's Name/Title: \_\_\_\_\_

APPLICANT'S PRINTED NAME: \_\_\_\_\_

**Other Skills/Memberships and Affiliations**

Do you have any special skills, volunteer experience and/or training that would enhance your ability to perform the position applied for?

Yes  No

If so, please explain:

\_\_\_\_\_

Do you hold a license or professional certification? Yes  No

If so, please specify:

\_\_\_\_\_

Do you participate in any professional associations that would enhance you ability to perform the position applied for?

Yes  No

If so, please explain:

\_\_\_\_\_

**References:** Please give the names of three persons not related to you, and preferably who you have worked with/for and whom you have known at least 3 years.

Name	Address/Phone/Email	Company Name	Years Known

**Please read carefully before signing.**

Rochester Telephone Company is an equal opportunity employer. Rochester Telephone Company does not discriminate in employment on account of race, color, religion, sex (pregnancy, gender identity, and sexual orientation), national origin, age (40 and over), disability, genetic information as referenced in the Genetic Information Nondiscrimination Act (GINA), military service veteran status or any other protected class as defined by federal, state, and local laws. Rochester Telephone Company will comply with its obligation to provide reasonable accommodation to qualified individuals with disabilities.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes an obligation for Rochester Telephone Company to hire me. If I am hired, I understand that either Rochester Telephone Company or I may terminate employment at any time for any reason, with or without cause and without prior notice. I understand that no representative of Rochester Telephone Company has the authority to make any assurance to the contrary. In addition, I understand that Rochester Telephone Company utilizes the national E-Verify system to confirm my employment eligibility.

I attest with my signature below that I have given to Rochester Telephone Company true and complete information on this application. No requested information has been concealed. I authorize Rochester Telephone Company to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for denial of employment or immediate dismissal.

\_\_\_\_\_  
**(Signature of Applicant)**

\_\_\_\_\_  
**(Date)**

**Note:** Applications for employment will be kept on file for one-year from the date of completion.