WYOMING COUNTY CIVIL SERVICE

338 North Main Street, Warsaw, New York 14569
Phone: (585) 786-8830
Website: www.wyomingco.net

APPLICATION FOR: EMPLOYMENT _____ OR EXAMINATION # _____

PRINT OR TYPE **ANSWER ALL QUESTIONS**

_____ _____
Position Title Exam Number

Name _____
LAST FIRST MIDDLE

Home Phone # _____ **Cell Phone #:** _____ **Email Address:** _____

Home Address _____
NUMBER STREET CITY STATE ZIP

Mailing Address (if different) _____
NUMBER STREET CITY STATE ZIP

CHANGE OF ADDRESS: You must notify this agency immediately of any change of address. The number and title of the examination or eligible list must also be included in this notification. **FAILURE TO COMPLY MAY RESULT IN YOUR NAME BEING REMOVED FROM AN ELIGIBLE LIST.**
Call this agency immediately if you do not receive a notice within seven days of the date of the examination informing you whether or not you are to be admitted.

LEGAL RESIDENCE	NAME	YEARS	MONTHS	PLEASE CHECK SCHOOL DISTRICT IN WHICH YOU RESIDE
COUNTY OF				Attica ____ Letchworth ____
CITY, TOWN, OR VILLAGE OF				Perry ____ Pioneer ____
STATE OF				Warsaw ____ Wyoming ____
				Other _____

ARE YOU A CITIZEN OF THE UNITED STATES ? ___Yes ___No

IF NOT, DO YOU HAVE THE LEGAL RIGHT TO ACCEPT EMPLOYMENT IN THE UNITED STATES? ___Yes ___No
(Non-citizens may be required to produce 1-151 or 1-1551 Alien Registration Card at time of appointment)

EMPLOYMENT PREFERENCES: Please check the type of work you would be willing to accept.

Full-Time_____ Part-Time _____ Temporary_____

PLEASE CHECK THOSE AGENCIES IN WHICH YOU WOULD BE WILLING TO ACCEPT WORK:

County _____ Towns _____ Villages _____ School Districts _____

FOR CIVIL SERVICE USE ONLY

Approved _____ Date _____ By _____

Disapproved _____ Conditional _____ Paid _____