

Attention Please Read Before Completing Application.

Please fill out application using a desktop computer rather than a cell phone.

How to complete form and submit application:

- 1. Download and save the PDF form to your desktop before completing form out and submitting.** (Any information typed into the form will be lost.)
2. Open the saved PDF form from your desktop.
3. Fill out the PDF form completely.
4. Click on the “Submit” button at the bottom of the PDF form.
(You will then be instructed to save and email your PDF form.)

If there are any questions please email:

PRC-SeasonalJobs@westchestercountyny.gov

Thank you.

Where did you hear about this job? _____

Comments: _____

1. Were you ever dismissed or discharged from any employment for reasons other than lack of work or funds? Yes ____ No ____
2. Did you ever resign from any employment rather than face dismissal? Yes ____ No ____
3. Did you ever receive a discharge from the armed forces of the United States which was other than honorable, or which was issued for other than honorable circumstances? Yes ____ No ____

If you answered "yes" to any questions above, you must give specifics, including date, nature and current disposition. Email or mail to above address an additional 8 1/2 x 11 sheet. Your application will not be processed until we receive it. None of the above circumstances represents an automatic bar to employment. Each case is considered and evaluated on individual merits in relation to the duties and responsibilities of the position(s) for which you are applying.

All statements are subject to verification and criminal records check.

This affirmation must be completed: I affirm that all statements made on this application (including any attached papers) are true under the penalties of perjury. (Applicants are advised that all statements made by them in connection with their application(s) for employment are subject to investigation and verification.) This application may be used for review by the prospective appointing authority as part of a background investigation.

Pursuant to 210.45 of the New York State Penal Law. It is a crime punishable as a class "A" misdemeanor to knowingly make a false statement herein.

By accepting employment with the County of Westchester, I hereby agree to submit to any and all forms of drug testing (such as urinalysis, breath and/or blood testing) as a condition of Seasonal Employment in accordance with Westchester County's Comprehensive Drug-Free Workplace Policy and Procedures. In addition, if offered employment, I will be subject to the Westchester County fingerprinting policy under which my appointment may be conditioned on the results of a fingerprinting investigation.

Date (mm/dd/yy): _____ ***Typing your full name into the box to the right is acknowledging you agree to the above statements.** _____

If under age 18, parent or guardian is required to read the statement below and type their full name before application can be submitted.

"I have read my child's or ward's completed application form and hereby give my permission for him or her to be hired by Westchester County for the purpose of seasonal employment and I further give my permission for him or her to receive emergency medical treatment if necessary. If at any time I revoke this permission, I will do so in writing to the Westchester County Department of Human Resources, and upon receipt by the Department of Human Resources of said revocation my child's/ward's employment shall be terminated."

By my signature below, I hereby give my permission for the applicant stated above to submit to any and all forms of drug testing (such as urinalysis, breath, and/or blood testing) as a condition of Seasonal Employment with Westchester County in accordance with Westchester County's Comprehensive Drug-Free Workplace Policy & Procedures.

Date (mm/dd/yy): _____ ***Typing your full name and information into the boxes to the right is acknowledging you agree to the above statements.** Parent or Guardian: _____
Parent or Guardian Phone Number: _____
Parent or Guardian Email Address: _____

***Please note: Written signature will be required if hired.**

