

CITY OF WATERTOWN APPLICATION FOR PROMOTION EXAMINATION OR EMPLOYMENT

Adopted 6/2018

MAIL OR DELIVER TO: City of Watertown, Civil Service Commission, 245 Washington Street, Room 205, Watertown NY 13601 Phone (315) 785-7733 ❖ www.watertown-ny.gov

Title of Exam / Position _____ **TYPE OR PRINT CLEARLY IN INK** _____ **Exam #** _____

NAME AND ADDRESS: IMMEDIATE notice should be given to this office if any changes in name or address occur.

Last Name _____	First Name _____	M.I. _____	Social Security # _____
Legal Address:		Mailing Address (If different from legal):	
Street _____	_____	Street or PO Box _____	_____
Apt/Rd# _____	_____	City/Village _____	_____
City/Village _____	_____	State _____ ZIP _____	_____
Town _____	_____	E-Mail Address _____	_____
School District _____	_____	Home Phone () _____	_____
County _____	_____	Work Phone () _____	_____
State _____	ZIP _____	Cell Phone () _____	_____

CURRENT TITLE _____ **START DATE** _____

PREVIOUS TITLE _____ **START DATE** _____

PREVIOUS TITLE _____ **START DATE** _____

VETERAN'S CREDIT: VETERAN DISABLED VETERAN CURRENTLY ON ACTIVE DUTY

Documentation of your veteran status (i.e.: discharge papers) should be attached to your application or mailed to this department. Current active duty military personnel must provide proof of status at time of application to receive conditional credit. Veteran credit claims must be verified before the eligible list is established.

Since January 1, 1951, have you used additional credits as a disabled/non-disabled veteran for appointment to any position in the public employment of New York State or any of its civil divisions? YES NO

IF YOU NEED SPECIAL EXAM ARRANGEMENTS (RELIGIOUS ACCOMMODATION OR DISABLED), INDICATE ACCOMMODATIONS NEEDED BELOW:

CONSTITUTIONAL OATH - I do hereby pledge and declare that I will support the Constitution of the United States and the Constitution of the State of New York, and I will faithfully discharge the duties of the position specified on this application according to the best of my ability.

ALL STATEMENTS ARE SUBJECT TO VERIFICATION. IT IS A CRIME, PURSUANT TO SECTION 210.45 OF THE NEW YORK STATE PENAL LAW, TO KNOWINGLY MAKE A FALSE STATEMENT HEREIN. MIS- REPRESENTATIONS MAY CONSTITUTE CAUSE FOR DISQUALIFICATION OR SUBSEQUENT DISCHARGE FROM EMPLOYMENT.

DECLARATION: I declare, subject to the penalties of law, that the statements made in this application (including any accompanying papers) are true and complete to the best of my knowledge. I authorize the City of Watertown to contact school/college and former employers cited in this application or attachments in order to verify work record and/or educational credentials. I further authorize the City of Watertown to obtain my NYS driver's abstract via the License Event Notification System if possession of a driver's license is a qualification for my position I understand that acceptance of this application by the City of Watertown does not constitute or imply a commitment or willingness to offer employment to me in this or any other position.

APPLICANT'S SIGNATURE _____ **DATE** _____

The New York State Human Rights Law prohibits discrimination in employment because of age, race, creed, color, national origin, sex, disability, marital status or criminal record. Accordingly, nothing in this application form should be viewed as expressing, directly or indirectly, any limitation, specification or discrimination as to age, race, creed, color, national origin, sex, disability, marital status or criminal record in connection with employment

CIVIL SERVICE USE ONLY: Reviewer _____ Date _____

Approved Disapproved Reason(s): _____

Seniority Date: _____

Payment Amount _____ **Cash** _____ **Check** _____ **Waived** _____ **Receipt #** _____ **Date:** _____

