



APPLICATION FOR EMPLOYMENT

OFFICE OF HUMAN RESOURCES
CITY OF SYRACUSE, MAYOR SHARON F. OWENS

Richard Alsever
Director

Michael Messersmith
Assistant Director

Thank you for applying to work at the City of Syracuse. Please read the following instructions carefully to ensure that your application is completed and submitted correctly. If you have any questions or concerns about the application, please contact the Office of Human Resources at personnel@syr.gov or 315-448-8780. You can find more information about working for the City and additional job postings at syr.gov/Work-For-Syracuse.

APPLICATION INSTRUCTIONS:

- 1) Answer all required questions (indicated by * asterisk) and any non-required questions that are applicable to you
- 2) Prepare your resume to be sent in along with the application
- 3) If you are mailing your application, prepare a stamped envelope addressed to:

**Office of Human Resources
City of Syracuse
300 South State Street
One Park Place, 7th Floor
Syracuse, NY 13202**

- 4) If emailing, send your application to personnel@syr.gov with subject line "[Full Name] [Job Title] [Source of Job Posting] Application"
- 5) The following documents should be included in your envelope/email:
 - ☐ Completed Application for Employment
 - ☐ Resume
 - ☐ Cover letter, if required

Human Resources
One Park Place
300 S. State Street
7th floor
Syracuse, NY 13202

Office: 315-448-8780
Fax: 315-448-8761
personnel@syr.gov

syr.gov/HR

The Affirmative Action Policy of the City of Syracuse is to provide equal employment opportunity for all individuals regardless of race, color, sex, religion, creed, age (18 and over), marital status, national origin, disability, veteran status, gender identity or gender expression, sexual or affectional preference or orientation, or any other classified group within the protected class. The City also complies with 31 CFR part 51. If you have a disability for which you wish special accommodation to be made, contact the Office of Human Resources at 315-448-8780 or personnel@syr.gov.

Continue to application



PERSONAL INFORMATION

*Name (Last, First, Middle):

*Address:

*Are you a resident of the City of Syracuse?

☐ Yes

☐ No

If not, would you be willing to relocate upon hire?

☐ Yes

☐ No

*Phone Number:

*Email:

*Are you legally authorized to work in the United States?

☐ Yes

☐ No

*Will you now or in the future require sponsorship for employment visa status (e.g. H-1 B visa status)?

☐ Yes

☐ No

*Are you 18 years or older?

☐ Yes

☐ No

Age if not:

EMPLOYMENT INFORMATION

*Title of position you are applying for:

*Type of employment:

☐ Full Time

☐ Part Time

☐ Summer/Intern

If an operator's license is required for the job you are applying for, please indicate:

Class Type: _____ Expiration Date: _____ I.D. Number: _____

*Have you previously been employed by the City of Syracuse?

☐ Yes

☐ No

If yes, when?

Previous position:

U.S. MILITARY SERVICE

*Have you ever been a member of the U.S. Military?

☐ Yes

☐ No

☐ Currently

If yes, please indicate the following:

Branch

Entry Date

Discharge Date

Type of Discharge

Rank

EDUCATION RECORD

	*Name of school	*Location (City, State)	*Graduated (Yes/No)	Degree type	Graduation year
High School					
College					
Graduate School					
Vocational/Technical					
Other					

*Do you have a special license, certification, or other authorization to practice a specific trade or profession?

☐ Yes

☐ No

If yes, please explain:

Application continues



GROWTH. DIVERSITY. OPPORTUNITY FOR ALL.

WORK HISTORY (Start with most recent position, attach additional sheets if more space is needed)				
1	*Job Title:		*From (MM/YYYY):	*To (MM/YYYY):
	*Reason for leaving:	*Type of employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Intern/Seasonal		
	*Name of Organization:	*Organization Address:		
	*Supervisor Contact Information:		*Responsibilities:	
2	*Job Title:		*From (MM/YYYY):	*To (MM/YYYY):
	*Reason for leaving:	*Type of employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Intern/Seasonal		
	*Name of Organization:	*Organization Address:		
	*Supervisor Contact Information:		*Responsibilities:	
3	*Job Title:		*From (MM/YYYY):	*To (MM/YYYY):
	*Reason for leaving:	*Type of employment: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Intern/Seasonal		
	*Name of Organization:	*Organization Address:		
	*Supervisor Contact Information:		*Responsibilities:	

***BACKGROUND INVESTIGATION:** Applicants may be required to undergo a criminal history background investigation. Failure to pass a background investigation may result in denial of employment. Pursuant to the Syracuse Fair Employment and Licensure Ordinance ("Ordinance"), the City does not conduct criminal history background checks during the application process until after an applicant is deemed qualified for a position and such applicant has been extended a conditional offer of employment, with the exception of the following: 1) Positions in which the City is barred from hiring an individual with certain convictions; 2) The Syracuse Police Department or any "police officer" and "peace officer" positions; and 3) Inquiries specifically authorized pursuant to applicable law. Pursuant to the Ordinance and New York State law, an applicant may not be denied employment because of a prior criminal record, unless there is a direct relationship between the offense and the employment sought or unless hiring would constitute an unreasonable risk.

***DECLARATION:** I declare that, subject to penalties of perjury, any statements made on or in connection with this application (including statements made in accompanying papers) have been examined by me and to the best of my knowledge are true and correct. I understand that any deliberate misrepresentation or omission of facts may be cause for voiding this application or termination of employment, unless otherwise prohibited by law. I also understand that all statements made in connection with this application are subject to verification.

***APPLICANT'S SIGNATURE:** _____ ***DATE:** _____