



APPLICATION FOR EMPLOYMENT

This application for employment shall be considered active for a period of time not to exceed 45 days from the date of this application.

We consider applicants for all positions without regard to race, color, religion, age, sex, gender identity or expression, sexual orientation, national origin, disability, political belief or activity, creed, marital or familial status, military or veteran status, genetic predisposition, victims of domestic violence status, association, or any other status protected by law.

Last Name:		First Name:		Middle Initial:
Street Address:			Apartment #:	
City:	State:	Zip:		
Phone:		Email:		

Position(s) applied for:	Date of Application:
How did you learn about us? <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other	

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with the Buffalo Zoo before? Yes No If yes, when? _____

Have you ever been employed with us before? Yes No If yes, when? _____

Are you related to any employee of the Buffalo Zoo? Yes No If yes, whom? _____

Are you currently employed? Yes No

On what date would you be available to work? _____

Are you available to work: Full-Time Part-Time Temporary/Seasonal

If Part-Time, Temporary/Seasonal, indicate days and hours you are available to work:

Are you currently on lay-off status and subject to recall? Yes No

Please indicate your desired wages: _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, sex, gender, national origin, disability or other protected status.

Employer #1		Work Performed	
Address:			
Phone:	<u>Dates Employed</u> From To		
Job Title:	Supervisor:		
Reason for leaving:			

Employer #2		Work Performed	
Address:			
Phone:	<u>Dates Employed</u> From To		
Job Title:	Supervisor:		
Reason for leaving:			

Employer #3		Work Performed	
Address:			
Phone:	<u>Dates Employed</u> From To		
Job Title:	Supervisor:		
Reason for leaving:			

Employer #4		Work Performed	
Address:			
Phone:	<u>Dates Employed</u> From To		
Job Title:	Supervisor:		
Reason for leaving:			

Please indicate by employer number _____ any of the above employers whom you **DO NOT** wish us to contact.

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills, licenses or certifications:

List professional, trade, business or civic activities and offices held. <i>Do not include memberships which would reveal race, color, religion, sex, gender, national origin, disability or any other protected status.</i>

JOB REFERENCES

Please list three **professional, business, or educational references** that we can contact to verify your work experience, and work ethic.

Name of Reference	How do you know this person	Phone Number

Applicant Statement

IT IS VERY IMPORTANT THAT YOU READ THIS SECTION CAREFULLY, AND THAT YOU FULLY UNDERSTAND IT BEFORE YOU SIGN IT. THIS SECTION AFFECTS YOUR LEGAL RIGHTS. IF YOU HAVE ANY QUESTIONS, PLEASE ASK BEFORE YOU SIGN THIS APPLICATION.

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. If I wish to be considered for employment beyond this time period, I should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Buffalo Zoo is of an “*at will*” nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this “*at will*” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Buffalo Zoo President or his/her designee.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

Proof of eligibility to work in the US will be required upon employment.

Signature of Applicant: _____ Date: _____

Consent and Authorization to Release Employment/Educational Information

I, _____ understand and agree that the Buffalo Zoo, any agent acting on their behalf, as well as any other person responding to a reference request pursuant to this application, can and will seek and/or disclose any and all information about me which said corporation, agent, or person may have. I specifically authorize said disclosure and agree to hold all such corporations, agents, or persons harmless for same. That is, I will not file a lawsuit, claim, or charge against them for such disclosure. Nor will I threaten same or otherwise seek any kind of compensation for such disclosure.

Signature of Applicant: _____ Date: _____

The Buffalo Zoo provides equal employment opportunity to all applicants and employees without regard to race, color, religion, age, sex, gender identity or expression, sexual orientation, national origin, disability, political belief or activity, creed, marital or familial status, military or veteran status, genetic predisposition, victims of domestic violence status, association, or any other status protected by law.

The policy applies to all areas of employment, including recruitment, hiring, training and development, promotion, transfer, termination, layoff, compensation benefits, social and recreational programs, and all other conditions and privileges of employment in accordance with applicable federal, state, and local laws.