



WE ARE NEW YORK'S LAW SCHOOL

Employment Application

First name _____ Middle initial _____ Last name _____ Date _____

Position seeking: _____ Salary requirements: _____ Date available: _____

Full-Time Part-Time If part-time, specify days and hours: _____

How did you learn about this position? _____

Personal

Street address _____ City, state, ZIP _____

Mobile phone _____ Home phone _____

Email _____

Have you ever applied for employment with NYLS?
 Yes No If yes, month and year: _____ Department: _____

Do you have any relatives working or studying at NYLS? Yes No
Are you legally eligible for employment in the United States? Yes No
Are you 18 or older? Yes No

Education

Graduate

Name and Location _____ Program or Major _____

No. of Years Completed _____ Degree or Diploma _____

College

Name and Location _____ Program or Major _____

No. of Years Completed _____ Degree or Diploma _____

Other

Name and Location _____ Program or Major _____

No. of Years Completed _____ Degree or Diploma _____

High School

Name and Location _____ Program or Major _____

No. of Years Completed _____ Degree or Diploma _____

Employment Application (continued)

Military Service

Have you served in the U.S. Military? Yes No

Dates of active duty: _____ Rank at discharge: _____

Description of duties: _____

Employment

Please provide your full-time and part-time employment record, starting with your current or most recent employer.

1.

Employer: _____ Phone: _____

Address: _____ Employment dates: _____
From To

Job title and brief description: _____

Supervisor's name and title: _____ Supervisor's phone: _____

Reason for leaving: _____

May we contact this employer? Yes No

2.

Employer: _____ Phone: _____

Address: _____ Employment dates: _____
From To

Job title and brief description: _____

Supervisor's name and title: _____ Supervisor's phone: _____

Reason for leaving: _____

May we contact this employer? Yes No

3.

Employer: _____ Phone: _____

Address: _____ Employment dates: _____
From To

Job title and brief description: _____

Supervisor's name and title: _____ Supervisor's phone: _____

Reason for leaving: _____

May we contact this employer? Yes No

Employment Application (continued)

Additional Information

Please indicate any other information that may be important to your application.

References

Please list three professional references and one personal reference.

1. Professional

Name: _____ Title: _____

Company: _____

Email: _____ Phone: _____

2. Professional

Name: _____ Title: _____

Company: _____

Email: _____ Phone: _____

3. Professional

Name: _____ Title: _____

Company: _____

Email: _____ Phone: _____

4. Personal

Name: _____ Title: _____

Company: _____

Email: _____ Phone: _____

Remarks

Authorization

By electronic signature below, I certify that the above statements are true and correct to the best of my knowledge, and that this information can be used for the purpose of processing my employment application and information. I understand that misrepresentation or omission of facts called for may result in my disqualification or dismissal.

Signature: _____ Date: _____

New York Law School is an equal opportunity employer.