

# *Allegany County Fair*

15 North Street, P.O. Box 96  
Angelica, New York 14709

*The Fair with a Country Smile*

## **Application For Seasonal Employment**

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

(Last)

(First)

(Initial)

Address: \_\_\_\_\_

(Street & No.)

(City)

(State)

(Zip)

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Age (CHECK ONE): 18 or older \_\_\_\_\_ Under 18 (Must provide working papers) \_\_\_\_\_

Education – Highest Grade Completed: \_\_\_\_\_

Position applying for: \_\_\_\_\_

Type of Position: Paid \_\_\_\_\_ Volunteer \_\_\_\_\_

Hours and Day Availability: \_\_\_\_\_

Have you worked for Allegany County Fair previously? \_\_\_\_\_

If yes, when and what position? \_\_\_\_\_

Current or Last Employer (Name of business and phone number)

Personal References (Excluding employees of the fair or relatives) Please provide Name, Occupation, Address and Phone Number.

1. \_\_\_\_\_

2. \_\_\_\_\_

I CERTIFY THAT THE STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT ANY DELIBERATE FALSIFICATION COULD RESULT IN TERMINATION OF MY EMPLOYMENT. I FURTHERMORE CERTIFY THAT I AGREE TO THE RULES OF THE FAIR AND WILL UPHOLD THEM TO THE BEST OF MY ABILITY.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

PLEASE FILL OUT COMPLETELY, REMEMBER TO SIGN AND DATE THIS APPLICATION

Return to: Allegany County Agricultural Society  
P.O. Box 96  
Angelica, NY 14709