

BOROUGH OF MERCERSBURG
APPLICATION FOR EMPLOYMENT
Equal Opportunity Employer

PLEASE PRINT ALL INFORMATION

Last Name	First Name	Middle Initial	Social Security #
Street Address		City	State Zip Code
()		()	Would you prefer to be contacted during
Daytime Phone	Evening Phone	____ Day ____ Evening ____ Anytime	

List the Jobs that you are applying for:

EDUCATION:

Circle the highest year completed: Elementary: 1 2 3 4 5 6 7 8 High: 9 10 11 12 College: Tech: 1 2 3 4 5 6

High School	Address:	# Years Attended	Did You Graduate?	Major:	Degree:
College/ University					
Technical/Trade School					

List any additional training, seminars, correspondence courses, ECT. that would have bearing on your qualifications.

WORK HISTORY

Most Recent/Current Employer: Starting Date: _____ To: _____

Employer Name	Address	Phone Number	Name of Supervisor	Starting Salary	Leaving/Current Salary
Job Title	Job Duties		Reason for Leaving/Looking Elsewhere		

Dates Employed: _____ To: _____

Employer Name	Address	Phone Number	Name of Supervisor	Starting Salary	Leaving/Current Salary
Job Title		Job Duties		Reason for Leaving/Looking Elsewhere	

Dates Employed: _____ To: _____

Employer Name	Address	Phone Number	Name of Supervisor	Starting Salary	Leaving/Current Salary
Job Title		Job Duties		Reason for Leaving/Looking Elsewhere	

Dates Employed: _____ To: _____

Employer Name	Address	Phone Number	Name of Supervisor	Starting Salary	Leaving/Current Salary
Job Title		Job Duties		Reason for Leaving/Looking Elsewhere	

Not any of the previously listed schools or employers, you were known by another name not listed here

Last Name First Name Middle

Are you able to perform the work of the job for which you are applying for? ____ YES ____ NO (If NO, see supplemental form or attach an explanation of any accommodations needed) The Borough will make reasonable accommodations if necessary to enable you to perform a job. The need for a reasonable accommodation will not be a factor in consideration for employment.

1. List any licenses or certifications you hold that have a bearing on your qualifications:

2. Have you ever had a license or certification revoked or suspended? _____ YES _____ NO
If yes please explain.

3. Have you ever been fired or asked to resign from a job? _____ YES _____ NO

4. Are you 18 years of age or older? _____ YES _____ NO (If you are under 18, you must present a Certificate from your School District stating your eligibility to work)

5. Are you legally eligible to be employed in the United States of America? _____ YES _____ NO (If hired, you will be required to show documentation verifying your eligibility.)

6. Have you ever been convicted or pled guilty to a crime other than a Summary Offense or Traffic Violation? _____ YES _____ NO (If YES PLEASE EXPLAIN BELOW) A conviction will not be a disqualification from employment unless it has bearings on your qualifications.)

Is there any other information we should be aware of which has a bearing on your qualifications for the work which you are applying? _____ YES _____ NO (If yes, list below or on a separate sheet. Do not volunteer any information about your age, sex, religion, race, national origin, or disability.)

LIST ATLEAST THREE REFERENCES WHO KNOW YOU PERSONNALLY AND WHO ARE FAMILIAR WITH YOUR WORK, QUALIFICATIONS, AND WHO ARE NOT RELATED TO YOU.

NAME	ADDRESS	PHONE NUMBER	YEARS KNOWN / RELATIONSHIP

I certify that to the best of my knowledge, the information of this form is correct a complete. I understand that any misrepresentation on this application will be cause for me to be removed from further consideration, or, if I have been hired, may be grounds for my dismissal.

Signature

Date

Please answer the questions on page 4 only if they are applicable to the type of work that you are applying for.

If you are applying for a specific position, you should answer the questions on the following list which have been indicated by a check mark before the number. If you are filling out a general application for our files, answer these questions which in your judgment are related to the type of work which you are seeking.

Answer If Checked:

1. Can you type? YES NO (SPEED, Correct words per minute.) _____
2. Can you take dictation without mechanical assistance? YES NO
(SPEED, spoken Words per minute) _____
3. Can you operate any type of electronic word processing equipment? YES NO (LIST TYPE OF EQUIPMENT)

4. List any other office machines that you can operate:

5. Do you possess a valid Pennsylvania Motor Vehicle Operator's License? YES NO
(For what class vehicle) _____ License Expiration Date: _____
6. What types of motor vehicles and construction equipment can you operate?

7. Are you available for overnight travel? YES NO
8. Are you available for occasional overtime work? YES NO
9. Can you begin work within 4 weeks of a job offer? YES NO (IF NO, WHEN?) _____
10. Have you ever been refused bond? YES NO
11. Can you Understand (U), Read (R), Speak (S), or Write (W) any language other than English YES NO
IF Yes List:

Language	Understand	Read	Speak	Write

12. Are you now serving or have you ever served in any branch of the U.S. Military Services including National Guard or Reserve? YES NO