EMPLOYMENT APPLICATION

Carmichaels Borough

100 West George Street Carmichaels Pa 15320

Applications are considered without regard to race, color, religion, gender, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

PERSONAL INFORMATION:

Date: Available Start Date:

Full Time Part Time

Name:

Street Address 1:

Street Address 2:

Phone:

City/State/Zip:

Email Address:

Position Applied For:

Have you ever been convicted of or charged with a felony or misdemeanor: Yes No

If yes, please explain details in full, including dates, details of offense(s) charged, jurisdiction and disposition of case:

|  |  |  |  |
| --- | --- | --- | --- |
| Schools/Colleges Attended: | # Years | Year Grad | Degree |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |

EDUCATION:

EMPLOYMENT/WORK EXPERIENCE:

Start with your present or most recent position. Include military service assignments and volunteer activities. Exclude organization names that indicate race, color, religion, sex or national origin.

Employer:

Job Title:

Supervisor:

Street Address:

City/State/Zip:

Phone:

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving:

Dates of Employment (Month/Year):

Employer:

Job Title:

Supervisor:

Street Address:

City/State/Zip:

Phone:

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving:

Dates of Employment (Month/Year):

Employer:

Job Title:

Supervisor:

Street Address:

City/State/Zip:

Phone:

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving:

Dates of Employment (Month/Year):

PERSONAL REFERENCES: Please provide names, addresses, phone numbers, relationship and how long known for

(no relatives please)

Name:

Relationship:

Street Address:

City/State/Zip :

Phone:

How long

Name:

Relationship:

Street Address:

City/State/Zip:

Phone:

How long

SPECIAL SKILLS: Describe any special skills or qualifications for this work:

I CERTIFY that the above answers are true and complete to the best of my knowledge. I authorize Carmichaels Borough, to investigate any statement contained in this application as necessary to determine my qualifications. I understand that this application is not and is not intended to be any kind of contract or agreement. In the event of employment, I understand that any false or misleading information given in my application, correspondence, discussions or interview may result in immediate termination. I understand also, that I am required to abide by all rules, regulations and policies of Carmichaels Borough.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

FOR OFFICE USE ONLY:

Arrange Interview: Yes No

Date: Time:

Remarks:

Approved: Yes No

Date:

By: