

Application For Employment

Portage Borough
721 Main Street
Portage, Pa 15946

We consider applicants for all Positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status

(PLEASE PRINT)

| | | |
|-------------------------|---------------|-----|
| Position(s) Applied For | DATE OF BIRTH | AGE |
|-------------------------|---------------|-----|

How Did You Learn About Us?

| | | |
|--|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Friend | <input type="checkbox"/> Walk-In |
| <input type="checkbox"/> Employment Agency | <input type="checkbox"/> Relative | <input type="checkbox"/> Other _____ |

| | | | | |
|-------------------------|-------------------------|------------------------|-------|----------|
| Last Name | First Name | Middle Name | | |
| Address Number | Street | City | State | Zip Code |
| Telephone Number (Home) | Telephone Number (Cell) | Social Security Number | | |

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 us before? Yes No
If Yes, Give Date _____

Have you ever been employed with us before? Yes No
If Yes, Give Date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of VISA or immigration Status? Yes No
(Proof of citizenship or immigration status will be required upon employment.)

On What date would you be available for work? _____

Are you available to work: Full time Part Time Shift Work Temporary

Are you currently on "Lay-Off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony with in the last 7 years? Yes No
(Convention will not necessarily disqualify an applicant from employment)

If Yes, please explain _____

Education

| | Elementary School | | | | | High School | | | | Undergraduate College / University | | | | Graduate / Professional | | | |
|---|-------------------|---|---|---|---|-------------|----|----|----|------------------------------------|---|---|---|-------------------------|---|---|---|
| School Name and Location | | | | | | | | | | | | | | | | | |
| Years Completed | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| Diploma / Degree | | | | | | | | | | | | | | | | | |
| Describe Course of Study | | | | | | | | | | | | | | | | | |
| Describe any specialized training, apprenticeship, skills and extra-curricular activities | | | | | | | | | | | | | | | | | |
| Describe any honors you have received | | | | | | | | | | | | | | | | | |
| State any additional information you feel may be helpful; to us in considering your application | | | | | | | | | | | | | | | | | |

| Indicate any foreign languages you can speak, read and / or write | | | |
|---|--------|------|------|
| | FLUENT | GOOD | FAIR |
| SPEAK | | | |
| READ | | | |
| WRITE | | | |

| List professional, trade, business or civic activities and offices held. (you may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:) |
|--|
| |
| |

References

| Give name, address and telephone number of three references who are not related to you and are not previous employers. |
|--|
| 1. |
| 2. |
| 3. |

Have you ever had any job-related training in the United States Military? Yes No

If Yes, please describe _____

Are you physically or otherwise unable to perform the duties of the job for which you are applying? Yes No

Employment Experience

Start with you present or last job. include any job related military service assignments and volunteer activities. you may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status

| | | | | |
|---------------------|------------|--------------------|----|----------------|
| 1. Employer | | Dates Employed | | Work Performed |
| | | From | To | |
| Address | | | | |
| Telephone number(s) | | Hourly Rate/Salary | | |
| | | From | To | |
| Job title | Supervisor | | | |
| Reason for leaving | | | | |

| | | | | |
|---------------------|------------|--------------------|----|----------------|
| 2. Employer | | Dates Employed | | Work Performed |
| | | From | To | |
| Address | | | | |
| Telephone number(s) | | Hourly Rate/Salary | | |
| | | From | To | |
| Job title | Supervisor | | | |
| Reason for leaving | | | | |

| | | | | |
|---------------------|------------|--------------------|----|----------------|
| 3. Employer | | Dates Employed | | Work Performed |
| | | From | To | |
| Address | | | | |
| Telephone number(s) | | Hourly Rate/Salary | | |
| | | From | To | |
| Job title | Supervisor | | | |
| Reason for leaving | | | | |

| | | | | |
|---------------------|------------|--------------------|----|----------------|
| 4. Employer | | Dates Employed | | Work Performed |
| | | From | To | |
| Address | | | | |
| Telephone number(s) | | Hourly Rate/Salary | | |
| | | From | To | |
| Job title | Supervisor | | | |
| Reason for leaving | | | | |

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications *Summarize special job-related and qualifications acquired from employment or other experience*

Applicants Statement

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. any applicant wishing to be considered for employment beyond this time period 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 this organization is of an "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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

Signature of Applicant

Date

FOR PERSONAL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Employed Yes No Dates of Employment _____

Job Title _____ Hourly Rate / Salary _____ Department _____

By _____
Name and Title

Date

Notes
