

APPLICATION FOR EMPLOYMENT BOROUGH OF DANVILLE

EQUAL OPPORTUNITY EMPLOYER

FOR OFFICE USE ONLY

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

POSITION(S) APPLIED FOR			DATE OF APPLICATION	
NAME LAST	FIRST		MIDDLE	
ADDRESS STREET	CITY		STATE	ZIP
TELEPHONE DAY	EVENING		SOCIAL SECURITY NUMBER	
IS IT OKAY TO CONTACT YOU AT THE ABOVE NUMBERS?			BEST TIME TO CONTACT YOU AT HOME:	
YES	NO			

A COVER LETTER IS ATTACHED YES NO

A RESUME IS ATTACHED YES NO

ARE YOU ELIGIBLE FOR EMPLOYMENT IN THE U.S.A? YES NO

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
PLEASE SUPPLY THE DATE LAST FILED?

HAVE YOU EVER BEEN EMPLOYED WITH US BEFORE? YES NO
PLEASE SUPPLY THE DATE(S) AND DEPTS. WORKED?

DO ANY OF YOUR FRIENDS OR RELATIVES WORK FOR DANVILLE BOROUGH? YES NO
PLEASE PROVIDE THE NAME, RELATIONSHIP, AND DEPARTMENT?

DO YOU HAVE ANY MILITARY TRAINING? YES NO
WHAT BRANCH AND HOW MANY YEARS?

ARE YOU CURRENTLY EMPLOYED? YES NO

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

WHAT DATE ARE YOU AVAILABLE FOR WORK? _____

WHAT IS YOUR DESIRED SALARY RANGE?

ARE YOU AVAILABLE AND WILLING TO WORK: FULL TIME	YES	NO
PART TIME	YES	NO
TEMPORAR	YES	NO
SEASONAL	YES	NO

ARE YOU WILLING TO UNDERGO A PHYSICAL AND DRUG TEST IF FOUND TO BE A SUCCESSFUL APPLICANT FOR THE JOB YOU ARE APPLYING FOR? YES NO

EDUCATION				
SCHOOL	NAME & ADDRESS	COURSE OF STUDY	#OF YEARS	DEGREE
HIGH SCHOOL				
COLLEGE				
OTHER				

WORK EXPERIENCE				
PLEASE BEGIN WITH MOST RECENT EMPLOYMENT (1-3)				
EMPLOYER #1	DATES EMPLOYED		WORK PREFORMED/JOB TITLE	
	FROM	TO		
ADDRESS				
TELEPHONE	HOURLY RATE/SALARY			
	START	FINAL		
SUPERVISOR				
REASON FOR LEAVING			MAY WE CONTACT?	
			YES	NO

EMPLOYER #2	DATES EMPLOYED		WORK PREFORMED/JOB TITLE	
	FROM	TO		
ADDRESS				
TELEPHONE	HOURLY RATE/SALARY			
	START	FINAL		
SUPERVISOR				
REASON FOR LEAVING			MAY WE CONTACT?	
			YES	NO

EMPLOYER #3	DATES EMPLOYED		WORK PERFORMED/JOB TITLE
	FROM	TO	
ADDRESS			
TELEPHONE	HOURLY RATE/SALARY		
	START	FINAL	
SUPERVISOR			
REASON FOR LEAVING			MAY WE CONTACT? YES NO

ADDITIONAL INFORMATION - OTHER QUALIFICATIONS

LIST OR SUMMARIZE SPECIAL JOB-RELATED SKILLS AND OR TRAINING AND OR QUALIFICATIONS THAT MAKE YOU MORE SUITABLE FOR THE JOB YOU ARE APPLYING FOR

LIST ANY SPECIALIZED EQUIPMENT YOU HAVE BEEN TRAINED TO USE OR HAVE USED THAT MAKE YOU MORE QUALIFIED FOR THE JOB YOU ARE APPLYING FOR

PERSONAL/PROFESSIONAL REFERENCES

DO NOT INCLUDE FAMILY MEMBERS OR SUPERVISORS ALREADY LISTED IN EMPLOYMENT

NAME	PHONE NUMBER	RELATIONSHIP	OTHER
1.			
2.			
3.			

PLEASE READ AND SIGN BELOW

The facts set forth in my application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application and in interview(s) shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

SIGNATURE OF APPLICANT	DATE
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