



Borough Of Wilkesburg Employment Application

THE BOROUGH OF WILKESBURG IS AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL BE CONSIDERED WITHOUT REGARD TO RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX, SEXUAL ORIENTATION, GENDER IDENTITY, DISABILITY, OR PREGNANCY. ALL INFORMATION REQUESTED ON THIS APPLICATION FORM IS SOLICITED FOR THE PURPOSE OF DETERMINING ABILITIES AND SKILLS REQUIRED FOR PROPER JOB PLACEMENT AND TO FACILITATE VERIFICATION OF THE INFORMATION REQUESTED.

INSTRUCTIONS: THIS APPLICATION MUST BE COMPLETED IN ITS ENTIRETY.
 PLEASE PRINT IN INK OR TYPE.
 IF YOU NEED ASSISTANCE IN COMPLETING THIS APPLICATION FORM BECAUSE OF A DISABILITY, PLEASE NOTIFY THE PERSONNEL OFFICE. (412) 244-2900 or info@wilkesburgpa.gov

POSITION APPLIED FOR:				<input type="checkbox"/> FULL TIME	<input type="checkbox"/> PART TIME
NAME	LAST	FIRST	MIDDLE		
ADDRESS					
PHONE		PUBLIC WORKS, CODE ENFORCEMENT, PARKING ENFORCEMENT ONLY:			
MOBILE: ())		DRIVERS LICENSE:			
HOME: ())					
EMAIL ADDRESS		_____		_____	
		NUMBER		STATE	
Are you at least 18 years old?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
If no, do you have a work permit?					
Are you a United States citizen or authorized to work in the United States?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
(Successful applicants are required to verify citizenship or authorization to work in the United States, as well as to provide documentation of identity and employment eligibility prior to starting employment as required by law).					
Have you ever applied for a job with the Borough of Wilkesburg?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, give date _____					
Have you ever been employed by the Borough of Wilkesburg?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, give date _____					
May we contact your current employer?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
If no, please identify someone familiar with your performance with your current employer that we may contact.					
NAME _____		PHONE NUMBER _____			
Can you work:	Evenings?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
	Nights?			<input type="checkbox"/> YES	<input type="checkbox"/> NO
	Weekends?			<input type="checkbox"/> YES	<input type="checkbox"/> NO

EDUCATION

DO YOU HAVE A HIGH SCHOOL
DIPLOMA OR G.E.D. CERTIFICATE?

YES NO

LAST HIGH SCHOOL ATTENDED:

NAME

COLLEGES, UNIVERSITIES, TRADE OR TECHNICAL SCHOOLS OR APPRENTICESHIP PROGRAMS:

NAME

LOCATION

NUMBER OF YEARS/
MONTHS ATTENDED

DEGREE, CREDITS,
CERTIFICATES OR LICENSES

MILITARY

BRANCH OF SERVICE

LENGTH OF SERVICE

RANK AT SEPARATION

SPECIALIZED TRAINING

Are you seeking a hiring preference under the Veterans' Preference Act?
If so, attach a copy of discharge or separation papers, DD Form 214, if any.

YES NO

Describe the type of equipment you are capable of
operating (machines, vehicles, computers, etc.)

LIST ANY RELEVANT CERTIFICATES OR LICENSES YOU HOLD

SUMMARIZE SPECIAL SKILLS, ABILITIES OR EXPERIENCES WHICH QUALIFY YOU FOR THIS POSITION.

BACKGROUND

Have you ever been convicted of, or pleaded guilty or no contest, to any misdemeanor or felony? YES NO

If yes, please identify the violations that you were convicted of and provide the date and place of your conviction. Conviction will not necessarily disqualify an applicant from employment.

EMPLOYMENT HISTORY

NOTE: WE RESERVE THE RIGHT TO VERIFY ANY EMPLOYMENT HISTORY OR RECORDS

LIST ALL EMPLOYMENT FOR THE PAST TEN YEARS, BEGINNING WITH CURRENT OR MOST RECENT POSITION.

<u>EMPLOYER</u>	DATES EMPLOYED	JOB TITLE
	FROM TO	
ADDRESS	Description of Job Duties and Reason for Leaving:	
SUPERVISOR'S NAME AND PHONE NUMBER:		
<p>Will this supervisor/employer give a good job reference? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If no, explain _____</p> <p>Were you discharged or asked to leave by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Were you ever suspended or given a written warning by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If yes to any of the above, please explain:</p>		
<u>EMPLOYER</u>	DATES EMPLOYED	JOB TITLE
	FROM TO	
ADDRESS	Description of Job Duties and Reason for Leaving:	
SUPERVISOR'S NAME AND PHONE NUMBER:		
<p>Will this supervisor/employer give a good job reference? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If no, explain _____</p> <p>Were you discharged or asked to leave by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Were you ever suspended or given a written warning by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If yes to any of the above, please explain:</p>		
<u>EMPLOYER</u>	DATES EMPLOYED	JOB TITLE
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SUPERVISOR'S NAME & PHONE NUMBER:		
<p>Will this supervisor/employer give a good job reference? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If no, explain _____</p> <p>Were you discharged or asked to leave by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Were you ever suspended or given a written warning by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>If yes to any of the above, please explain _____</p>		

REFERENCES

PLEASE LIST THREE REFERENCES OTHER THAN RELATIVES OR FORMER EMPLOYERS:

NAME / ADDRESS	PHONE NUMBER	RELATIONSHIP
1. _____ _____	_____	_____
2. _____ _____	_____	_____
3. _____ _____	_____	_____

CERTIFICATION, AUTHORIZATION AND AGREEMENT

I certify that the information supplied by me on this application form and in my resume, if any, is true and complete and does not contain any falsifications, omissions, or concealments of material fact. I authorize the Borough of Wilkinsburg to investigate the truth of this information and of any other information I may supply during a pre-employment interview. I further authorize every school, employer, person and agency identified by me on this form or in my resume to release any and all verifying information the Borough of Wilkinsburg may solicit from it or them. I further authorize the Borough of Wilkinsburg to investigate my criminal history and other aspects of my personal history, including my character and general reputation. If my application is denied in whole or in part because of information contained in criminal history records, the Borough of Wilkinsburg will so advise me.

I hereby release all law enforcement agencies, my former employers, all educational institutions and programs and every other person identified by me on this form or in my resume from liability for any damage or injury to me arising out of the release of information requested by the Borough of Wilkinsburg.

I understand and agree that the Borough of Wilkinsburg's acceptance of this application does not constitute any promise, expressed or implied, that I will be hired. I further understand that the Borough of Wilkinsburg does not guarantee anyone employment for any specific length of time. I therefore agree that, if I am hired, my employment may be terminated by either me or by the Borough of Wilkinsburg at any time with or without cause and without prior notice, except as may be required by law.

I further understand and agree that any offer of employment the Borough of Wilkinsburg may make me (and, if I am hired, my continued employment) will be contingent upon my submission of evidence verifying that I am authorized to work in the United States and may be contingent upon my taking and passing physical examinations and drug tests.

I certify that I am not a party to any contract or other obligation which would limit, interfere with or restrict my ability to work for the Borough of Wilkinsburg in any way.

I hereby acknowledge that I have read this section of the employment application and fully understand the meaning and effect of signing this form.

SIGNED _____

DATE _____