

PENNSBURG BOROUGH
76 West 6th Street
Pennsburg, PA 18073
Office: 215-679-4546 Fax: 215-679-5140
pennsburginfo@pennsburg.us

EMPLOYMENT APPLICATION

APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	Email		
If related to anyone in our employ, state name & department			
Have you ever had your driver's license revoked? Yes _____ No _____			
Have you ever been arrested or convicted of a crime? Yes _____ No _____			

EMPLOYMENT DESIRED

Position Applied for	Date you can start:
Salary desired	Are you employed now?
If so, may we inquire of your present employer?	

EDUCATION

High School		Address	
Number of years attended	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree	
College		Address	
Number of years attended	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree	
Other		Address	
Number of years attended	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
		Degree	

List any other training, seminars, licenses or certifications that would have a bearing on your qualifications.

FORMER EMPLOYERS

Date of employment:	Name & Address of Employer	Salary	Position	Reason for Leaving
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From: To:				
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From: To:				
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From: To:				
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REFERENCES

Give below the names of three persons not related to you, whom you have known at least one year.

Full Name				
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Address		Phone
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Business		Years Acquainted
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Full Name				
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Address		Phone
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Business		Years Acquainted
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Full Name				
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Address		Phone
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Business		Years Acquainted
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Are you able to perform the work of the job for which you are applying? YES NO

If no, please describe accommodations needed. The employer 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.

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 eligibility.)

I certify that to the best of my knowledge, the information on this form is correct and complete. I authorize the investigation of all statements contained on this application. 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 termination. Further, I understand and agree that my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary be terminated at anytime without previous notice.

Date: _____

Signature: _____

An Equal Opportunity Employer