

Borough of Crafton

Application for Employment

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

Name _____ Social Security # N/A

Address _____

_____ Telephone # _____

Educational History (Begin with most recent)

_____ Year _____
_____ Year _____
_____ Year _____
_____ Year _____

Employment History (Begin with current or most recent)

<u>Employer</u>	<u>Address</u>	<u>From/To</u>	<u>Reason for Leaving</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Position Applying For: _____

Part Time [] Full Time []

If you are under 18 years of age, can you provide required proof of your eligibility to work (Worker's Permit) Yes [] No [] Date of Birth _____

Have you ever filed an application with the Borough in the past? Yes [] No []

If you are currently employed, may we contact your present employer? Yes [] No []

Have you ever been convicted of a felony within the last seven years? Yes [] No []

If "yes", please explain _____

IF YOU ARE APPLYING FOR A “FULL TIME” POSITION Or PUBLIC WORKS LABORER POSITION, PLEASE CONTINUE ON TO NEXT SECTION ENTITLED “FULL TIME ONLY”. IF NOT, CONTINUE ON TO APPLICANT’S STATEMENT/SIGNATURE.

Full Time Only

Please list any special job-related skills and qualifications you have acquired from employment or other experience.

Please list the name, address and telephone number of three references who are not related to you and are not previous employers:

Have you ever served in the U. S. Military? Yes [] No [] If yes, please describe

Full Time and Part Time:

APPLICANT’S STATEMENT

I certify that the 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” nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by Council or the President or Vice President of Council.

In the event of employment, I understand that false or misleading information given in my application or interview 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 _____