Employment Application

All qualified applications will be considered without regard to race, color, religion, or national original, ancestry, sex, non-job related disabilities or age (40 and over). 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.

This application must be completed in its entirety.

	Today's [Date	
Position Applied For	•		
Please check one ☐ Full-time ☐ Part	-time	□Volunteer	
CONTACT INFORMATION			
Name			
Last First		Middle	
Street Address			
City Stat	State		
Phone No Alternate (Please give a number that you may be reached or a			
(Flease give a fluffiber that you flay be reached of a	illessage illa	y be left from 5.00Ai	VI (0 4.00PIVI)
IDENTIFICATION INFORMATION			
		C+-+-	
Driver License No.			
Class of Driver License (check all that apply)			⊔ Class C
Driver License Expiration Date			
Are you at least 18 years of age? ☐ Yes If you answered no to the above question		ve a work permit?	□ Yes □ No
Are you a United States citizen or authorized to v (Proof of citizenship or immigration status will be requ			☐ Yes ☐ No
HOURS OF EMPLOYMENT			
Are you able and willing to work over-time?	□ Yes	□ No	
Are you able and willing to work weekends?	□ Yes	□No	

EMPLOYMENT HISTORY (List all employers for the last five years and a minimum of your last three employers.)

	Date of Employment	to
Employer		
		_
Telephone	Supervisor's Name	
Reason for leaving	Hour Rate/Salary	
Can we contact this employer?	☐ Yes ☐ No	
Will the supervisor/employer pr	rovide a positive job reference?	□No
If no to either of the questions a	above, please explain	
• Ever disciplined (given a employer? □ γ	written warning, suspended, denied a pay ind Yes	
If yes to any of these three situa	ations above, please explain	
Job Title	Date of Employment	to
	Date of Employment	
Employer		
Employer		
EmployerAddress Telephone		
EmployerAddress Telephone	Supervisor's Name	
EmployerAddress Telephone Reason for leaving	Supervisor's NameHour Rate/Salary	
Employer	Supervisor's NameHour Rate/Salary	□No

	Date of Employment	to
Employer		
Address		
Telephone	Supervisor's Name	
Reason for leaving	Hour Rate/Salary	
Can we contact this emplo	oyer? □Yes □No	
Will the supervisor/emplo	oyer provide a positive job reference? ☐ Yes	□No
If no to either of the ques	tions above, please explain	
 Ever disciplined (g employer? Ever counseled or ☐ Yes 	ed to resign by this employer?	rease, etc.) by this y this employer?
Job Title	Date of Employment to	0
Employer		
Address		
Telephone	Supervisor's Name	
Reason for leaving	Hour Rate/Salary	
Reason for leaving Can we contact this emplo		
Can we contact this emplo		□No
Can we contact this emplo	oyer?	

EDUCATION			
	Institution Name	Graduate (Y/N)	Degree/Field
High School			
College/University			
Specialized Training			
Other Education			
If you did not gradua	te from high school, did you obta	ain a GED?	☐ Yes ☐ No
MILITARY			
Branch of Service		Length of Service	
Rank at Separation _		Type of Discharge	
Active Reserve [□ Yes □ No		
Reserve Requiremen	ts		
Specialized Training			
Describe the types or	ons f equipment you have experienc	e in operating?	
List any trade, profes	ssional or skill certificates that yo	ou have:	
Summarize special sk	kills, abilities or experiences whic	ch qualify you for th	nis position:

Have you been charged with a crime in the past three (3) years? If yes, please provide the following information:				□Yes	□No
Charged Offense	City/County	State	Date	Disposi	tion of Case
Have you been convid	<u>l</u> cted with a crime i	l <u> </u>	t three (3) years?	☐ Yes	□No
If yes, please provide t	the following inform	nation:	· · · · · · · · · · · · · · · · · · ·		
NOTE: Criminal conviction	ns are not necessarily a	bar to beir	ng hired. All relevant cir	cumstances w	vill be considered.
TRAFFIC/DRIVING REG	CORD				
List all traffic citations		at you we	re involved in withir	n the last th	ree (3) years
(excluding parking tic					Fault Found?
Charged Offense	Location of Inci	dent	Date of Incid	ent	(Y/N)
Have you been convid	l cted, pleaded no co	ontention	or paid a fine for a	ny traffic vio	l plations in the
past three (3) years?	☐ Yes	□No			
REFERENCES					
List three (3) references other than relatives.					
Name	Address	S	Telephone	R	elationship

BACKGOURND INFORMATION

AUTHORIZATION FOR BACKGROUND INVESTIGATION

or an independent i	nvestigating agency to c	_, hereby authorize the Ford City onduct a thorough investigation of iminal, and driving records.	
I hereby release any any and all liability r from liability are vol	/ current or former empl resulting from the releas	oyers or institutions, their agents e of such information. My author ization shall be effective for pre-e	ization and release
It is my intention th	at any copy of this autho	orization be as effective as is the c	original.
	<u>PLEASE PROVIDE TH</u>	E FOLLOWING INFORMATION	
Applicant's Name: _	Last	First	Middle
Alias/Maiden/Other	· Name(s):		
Driver's License Nur	mber:	State:	
Social Security Num	ber:		
Position Applied for	:		
	SIGNATURE OF APPLICA	ANT D.	ATE