



The City of Lower Burrell

2800 Bethel Street
Lower Burrell, Pennsylvania 15068

APPLICATION FOR EMPLOYMENT

The City of Lower Burrell is an Equal Opportunity Employer. All qualified applicants will be considered without regard to race, color religion, national origin, ancestry, sex, non-job related disabilities or age. All information requested on this application 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, because of a disability, you need assistance in completing this application form please notify the City Administrator's Office at 724-335-9875.

POSITION APPLIED FOR:

Full-Time Part-Time Position: _____
First Name: _____ Last Name: _____
Street: _____ City/State/Zip: _____
H.Phone: _____ Cell: _____ E-mail: _____

1. Are you over 18 years of age?..... Yes No

If NO, do you have a work permit? Yes No

2. Are you a United States citizen or authorize to work in the United States?..... Yes No

(Proof of citizenship or immigration status will be required upon employment.)

3. Have you ever filed an application with Lower Burrell?..... Yes No

If YES, please provide date _____

4. Have you ever been employed with Lower Burrell? Yes No

If YES, please provide date and supervisor's name _____

5. Do you have a valid Pennsylvania or other state driver's license? Yes No

If YES, State _____ Number _____ Commercial License..... Yes No

6. Do you have any relatives who are currently employed by the City or serve as elected officials? Yes No

7. Have you ever been convicted of a felony or misdemeanor?..... Yes No

(A conviction does not necessarily cause disqualification from employment.)

If YES, please explain _____

8. Can you perform the essential functions of the job outlined on the attached job description? Yes No

9. Are you presently employed?..... Yes No

10. May we contact your current employer? Yes No

If NO, please identify someone familiar with your performance for your current employer that we may contact.

Name/Phone Number _____

EXPERIENCE: List positions beginning with most recent.

Company Name: _____ **Address:** _____

Employed Dates: _____ Position Held: _____

Salary: _____ Reason for Leaving: _____

Name and Title of Supervisor: _____ E-mail or Phone: _____

Company Name: _____ **Address:** _____

Employed Dates: _____ Position Held: _____

Salary: _____ Reason for Leaving: _____

Name and Title of Supervisor: _____ E-mail or Phone: _____

Company Name: _____ **Address:** _____

Employed Dates: _____ Position Held: _____

Salary: _____ Reason for Leaving: _____

Name and Title of Supervisor: _____ E-mail or Phone: _____

REFERENCES: (exclude past employers and relatives)

Name and Occupation:

Address: _____ E-mail or Phone: _____

Name and Occupation:

Address: _____ E-mail or Phone: _____

Name and Occupation:

Address: _____ E-mail or Phone: _____

OTHER QUALIFICATIONS:

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

List any trade, professional or skill certifications you hold.

Summarize any special skills, experience or background which you feel qualifies you for the position being applied for:

EDUCATION:

High School Name: _____ **Address:** _____

Course: _____ Graduated: Yes No Other: _____

College/Other: _____ **Address:** _____

Course: _____ Graduated: Yes No Other: _____

College/Other: _____ **Address:** _____

Course: _____ Graduated: Yes No Other: _____

MILITARY:

Branch of Service: _____ Length of Service: _____ Rank at Separation: _____

Reserve Requirements: _____ Specialized Training: _____

Have you been Honorable discharged? Yes No If yes, please attach Form DD-214

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application 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 bureau of your choice.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby authorize all current and former employers, educational institution and references to release information relevant to my application for employment and I release the City, all current and former employers, education institutions and references from any and all liability related to the release of such information.

Please attach resume. Please send all applications to the City of Lower Burrell, Attention City Administrator, 2800 Bethel Street, Lower Burrell, PA 15068.

Signature of Applicant

Date

FOR CITY USE ONLY

Please date stamp received below: