BOROUGH OF SELINSGROVE
Employment Application

The Borough of Selinsgrove is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief or disability.

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Personal Data

_____	_____	_____	
First Name	Middle	Last	
_____	_____	_____	_____
Street Address	City	State	Zip Code
_____	_____	_____	
Home Telephone Number	Social Security Number	Today's Date	

_____
Daytime Telephone Number at which we may contact you

Are you 18 years of age or older? Yes _____ No _____

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

If "yes", please explain:

_____

How were you referred to the Borough of Selinsgrove? Please circle the number of the most appropriate response.

1	2	3	4	5	6
College or University	Recruiter or Agency	Employee	Adver-tisement	No Referral; Walk-In	Other: _____

Education

High School
School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

College
School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

College
School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

Trade School/Vocational Training
School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

Graduate School

School Name: _____

City and State: _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

List any certificates earned or in progress, and/or any additional training programs not included in your formal education.

_____

_____

List any Professional Affiliations to which you belong (please do not list activities which would indicate age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief, or disability):

_____

_____

Previous Employment

List your current or most recent employment first. Include work related internships and volunteer work.

Current Employer: _____

City and State:_____

Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Dates of Employment: From:_____ To: _____

May We Contact Your Employer: Yes ___ No ___

Previous Employer:_____

City and State:_____

Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Dates of Employment: From:_____ To: _____

May We Contact Your Employer: Yes ___ No ___

Previous Employer:_____

City and State:_____

Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Dates of Employment: From:_____ To: _____

May We Contact Your Employer: Yes ___ No ___

Professional References

Name	Title	Company	Phone	Professional Relationship

Releases and Applicant's Signature

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the Borough may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information for the Borough of Selinsgrove and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

_____
Initials

All hiring and employment at the Borough of Selinsgrove is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by the Borough of Selinsgrove has no specific term and may be terminated by the employee or the Borough of Selinsgrove with or without notice. I acknowledge that the Borough of Selinsgrove has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with the Borough of Selinsgrove, and that failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless any individual, the Borough of Selinsgrove, business institution or government agency from all liability with regard to furnishing information to the Borough of Selinsgrove I agree to release and hold harmless the Borough of Selinsgrove from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with the Borough of Selinsgrove may be terminated.

_____ _____
Applicant's Signature Date

Applicant Release

Please submit a resume with this Employment Application.

Borough of Selinsgrove

In connection with my application for employment (including contract for services) and as a condition of continuing employment, I understand that investigative background inquiries are to be made on me including consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, and experience along with reasons for termination of employment from previous employers. Further I understand that the Borough of Selinsgrove will be requesting information from various Federal, State, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies.

I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from the Borough of Selinsgrove and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

_____ _____

Applicant's Signature Date

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose:

Please Print Clearly:

Print Full Name:_____ Sex: Male ___ Female ___

Print other names you have used: _____ Dates used: _____

Date of Birth (mm/dd/yy): _____ Social Security #: _____

Current Drivers License #: _____ Issuing State: _____

CDL: Yes: _____ No.: _____

Other Drivers License #s: _____ Issuing State: _____

(list last 7 years only)