

Do you have a valid driver's license? Yes No

If yes, please list your driver's license number: _____

Do you currently hold a CDL license? Yes No

Are there currently any points assessed against your license? Yes No

If yes, how many? _____

Do you have transportation to and from work? Yes No

Have you had your driving privileges suspended or revoked in the last five years? Yes No

If yes, what were the circumstances surrounding the suspension or revocation of your driving privileges?

EDUCATION (NOTE: Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certifications and registrations.)

EDUCATION	NAME & LOCATION OF SCHOOL	YEARS COMPLETED	MAJOR	DIPLOMA/ DEGREE
Elementary School				
High School				
College/ University				
Other (specify)				
Other (specify)				

SPECIAL SKILLS/QUALIFICATIONS: LIST ALL SPECIAL SKILLS YOU POSSESS AND MACHINES OR OFFICE EQUIPMENT YOU CAN USE, SUCH AS CALCULATORS, PRINTING OR GRAPHICS EQUIPMENT, COMPUTER EQUIPMENT, TYPES OF SOFTWARE AND HARDWARE, ETC., AND ANY SKILLS WHICH YOU FEEL PARTICULARLY FIT YOU FOR WORK IN THE POSITION(S) APPLIED FOR:

REFERENCES (Not Employers or Relatives)

Name	Address	Telephone #

EMPLOYMENT HISTORY: This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experiences should clearly describe your qualifications. Include ALL employment. Begin with your current or last position and work back to your first position.

Employer	<u>Dates Employed</u>	
	<u>From</u>	<u>To</u>
Address		
Telephone Number(s)		Current/Final Salary
Job Title		Supervisor
Summary of Experience:		
Reason for Leaving:		

Employer	<u>Dates Employed</u>	
	<u>From</u>	<u>To</u>
Address		
Telephone Number(s)		Current/Final Salary
Job Title		Supervisor
Summary of Experience:		
Reason for Leaving:		

Employer	<u>Dates Employed</u>	
	<u>From</u>	<u>To</u>
Address		
Telephone Number(s)		Current/Final Salary
Job Title		Supervisor
Summary of Experience:		
Reason for Leaving:		

Employer	<u>Dates Employed</u>	
	<u>From</u>	<u>To</u>
Address		
Telephone Number(s)		Current/Final Salary
Job Title		Supervisor
Summary of Experience:		
Reason for Leaving:		

Employer	<u>Dates Employed</u>	
	<u>From</u>	<u>To</u>
Address		
Telephone Number(s)		Current/Final Salary
Job Title		Supervisor
Summary of Experience:		
Reason for Leaving:		

CERTIFICATION (PLEASE READ AND SIGN BELOW)

I certify that the information contained herein is true and complete.

I understand that some positions may require post offer, pre-employment, physical, Drug/Alcohol Testing and/or psychological examinations. I understand, if employed, I will be required to contribute to a State-administered pension system.

I authorize the Borough of Hamburg to conduct a background investigation pertaining to my qualifications and the statements contained in this application. I further authorize the Borough of Hamburg to contact the references I have listed on my application. I understand that this background investigation may include the following and I hereby give my consent.

- A. Credit check
- B. Reference check
- C. Employment history check

If there is a particular employer(s) you do not wish us to contact, please indicate which one(s).

- D. Review of driving record
- E. Physical examination, including drug and/or alcohol screening
(MAY BE CONDUCTED AFTER EMPLOYMENT IS OFFERED BY THE BOROUGH)

I understand any misstatement or omission on this form or during my interview may result in my disqualification for employment or termination of my employment if I have already been appointed.

SIGNATURE OF APPLICANT _____

DATE: _____

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.