

# Application for Employment



Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

PO Box 427, Gap PA 17527  
(717) 442-8280

## Personal Information

Name \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_  
 Social Security # \_\_\_\_\_ Phone # \_\_\_\_\_  
 Cellular/Other Phone \_\_\_\_\_ e-mail address \_\_\_\_\_  
 If you are under 18, and it is required, can you furnish a work permit?  Yes  No  
 Are you legally eligible for employment in this country?  Yes  No

## Employment Desired

Position applied for \_\_\_\_\_ Date available for work \_\_\_\_\_  
 Desired Salary Range \_\_\_\_\_ Are you employed now?  Yes  No  
 Have you ever been employed here before? If yes, give dates and positions.  Yes  No \_\_\_\_\_  
 Referred by \_\_\_\_\_  
 Type of employment desired  Full-Time  Part-Time  Seasonal  
 Have you ever pled "Guilty" or "no contest" to, or been convicted of a crime?  Yes  No  
 If yes, please provide date(s) and details \_\_\_\_\_

## Educational Background

	Name and Location	# Years	Did you Graduate	Degree
High School				
College				
Trade/Other				

## References

People that can help validate information from the application (ie: former employers, managers, supervisors, work associates)

Name	Telephone	# of Years Known	Position

People that can help validate information your character (ie: personal friend, mentor)

Name	Telephone	# of Years Known

## Skills and Qualifications

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying. \_\_\_\_\_

Activities/Special Interests/Hobbies \_\_\_\_\_

## Employment History

From	To	Employer	Phone
Job Title		Address	
Immediate Supervisor/Title		Summarize the nature of work and job responsibilities	
May we contact for references <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
Hourly Rate/Salary		Reason for Leaving	

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Job Title		Address	
Immediate Supervisor/Title		Summarize the nature of work and job responsibilities	
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Job Title		Address	
Immediate Supervisor/Title		Summarize the nature of work and job responsibilities	
May we contact for references <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
Hourly Rate/Salary		Reason for Leaving	

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me. I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law. I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application. If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president. I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_