



Borough of Tipton

205 South Callowhill Street
Tipton, Pennsylvania 19562
610-682-2541 / Fax 610-682-1636

Application for Employment

Personal Information

Name: _____
(first) (middle initial) (last)

Address: _____
(street address)

(city) (state) (zip)

Phone Number: _____
(home) (cell)

Email Address: _____

State former name(s) by which you have been known: _____

Social Security Number: _____

Are you a U.S. Citizen? Yes _____ No _____

If no are you legally able to work in the United States? Yes _____ No _____

Do you have a valid PA State Driver's License? Yes _____ No _____

License Number _____ Class _____ Expiration Date: _____

Have you ever had your driver's license revoked or suspended? Yes _____ No _____

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

(conviction will not necessarily disqualify an applicant from consideration for employment)

Have you ever served in the Armed Forces of the United States? Yes _____ No _____

If yes, what branch? _____ List dates of service: _____ To _____

Did you receive an honorable discharge? Yes _____ No _____

Position Applying For

Title: _____

Full Time: _____ Part Time: _____ Seasonal: _____

Date available for work: _____

Do you have any relatives working for the Borough? Yes _____ No _____

Have you ever been employed by the Borough of Tipton? Yes _____ No _____

If yes please indicate position held: _____

Educational Background

	Name	Address	Did you graduate	Degree
High School:			yes / no	
College:			yes / no	
Technical School:			yes / no	

Employment History

Please list all employment for the past 10 years starting with most recent

Company Name: _____
 Company Address: _____
 Exact Title: _____
 Supervisor's Name: _____ Phone Number: _____
 From: _____ To: _____
 Length of Employment: From: _____ To: _____
 Earnings: \$ _____ per _____ Hours worked per week: _____

Company Name: _____
 Company Address: _____
 Exact Title: _____
 Supervisor's Name: _____ Phone Number: _____
 May we contact them? Yes _____ No _____
 Length of Employment: From: _____ To: _____
 Earnings: \$ _____ per _____ Hours worked per week: _____

Company Name: _____
 Company Address: _____
 Exact Title: _____
 Supervisor's Name: _____ Phone Number: _____
 May we contact them? Yes _____ No _____
 Length of Employment: From: _____ To: _____
 Earnings: \$ _____ per _____ Hours worked per week: _____

Company Name: _____
Company Address: _____
Exact Title: _____
Supervisor's Name: _____ Phone Number: _____
May we contact them? Yes _____ No _____
Length of Employment: From: _____ To: _____
Earnings: \$_____ per _____ Hours worked per week: _____

Company Name: _____
Company Address: _____
Exact Title: _____
Supervisor's Name: _____ Phone Number: _____
May we contact them? Yes _____ No _____
Length of Employment: From: _____ To: _____
Earnings: \$_____ per _____ Hours worked per week: _____

Are you fluent in any language other than English? Yes _____ No _____ If yes what language? _____
Do you feel you can perform the job function in which you are applying for? Yes _____ No _____
In case of emergency who may we contact: _____ Phone number: _____

References

Please list at least three (3) character references who are not relatives

Name	Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

Affirmation

I declare, subject to the penalties of perjury, that the statements made in this application (including statements made in my accompanying papers) have been examined by me and to the best of my knowledge and belief are true and correct. I further request and authorize any former or present employer, military records center, police, parole and probation agencies and former schools to provide to the Borough of Topton any and all information including, but not limited to, information as to my character, habits, work ability and/or education. In consideration of compliance with this request, I hereby release and discharge said institutions from any claims, liabilities or damages.

Signature of Applicant _____

Date _____

The Commonwealth of Pennsylvania Human Relations Act prohibits discrimination in employment because of age, race, religion, creed, color, national origin, handicapped status, military/veteran status, sex or marital status. Accordingly, the Borough of Tipton does not discriminate as to age, race, religion, creed, color, national origin, handicapped status, military/veteran status, sex or marital status.

Applicant's Certification

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE YOU SIGN & RETURN APPLICATION

I understand that any final hiring decision is contingent upon satisfactory checks of references and satisfactory results of a medical exam and drug screening, if required by Borough of Tipton. If I am employed by Borough of Tipton, I agree to comply with all rules, regulations, policies and procedures now in existence or later adopted pertaining to its employees. I understand that these rules, regulations, policies and procedures may be changed by Borough of Tipton at any time, with or without notice, and with or without negotiation. I agree that if I am hired by Borough of Tipton that I will not divulge to any person or organization any confidential information which I may obtain in the course of my employment, unless authorized in advance and in writing to do so by Borough of Tipton.

DRUG SCREENING POLICY AND STATEMENT

I understand that Borough of Tipton requires a drug screening test as a part of its selection and hiring process. I also understand that such drug screening will consist of the taking of urine, or other medically recognized test designed to detect traceable amounts of a controlled substance in my body. If the test result is positive, I will be disqualified from further consideration for a period of at least one (1) year. I hereby give my consent to Borough of Tipton to administer any drug screening procedures to me, and to use the results thereof in further determining my employment with Borough of Tipton. If employed, I further agree to submit to drug screening if requested of me at any time during my employment. I have read and understand the above statement.

CONDITIONS OF EMPLOYMENT

I understand that if I am employed, any misrepresentation or omission of any material fact on this application is sufficient cause for dismissal. Furthermore, any misrepresentation or omission of any material fact on this application may result in no offer of employment being made, or withdrawal of any offer of employment prior to my beginning work. I agree to conform to the rules and regulations of Borough of Tipton and understand that if hired, I will be a "terminable-at-will" employee, and that my employment and compensation can be terminated with or without cause and with or without notice, at anytime, at the option of either Borough of Tipton or myself.

I hereby authorize Borough of Tipton to obtain any and all information regarding me, my work record, driving record, auto insurance and my reputation which it deems necessary to process my application for employment. I authorize any official representative of Borough of Tipton to obtain any information deemed necessary for consideration of my application for employment from all current or former employers and any other individual or organization named or referred to in this application.

I understand that the information released is for official use by Borough of Tipton in determining my suitability for employment. I also agree that any information obtained by Borough of Tipton pursuant to this authorization shall become and remain the property of Borough of Tipton. I hereby waive any right to receive a copy of information provided to Borough of Tipton in connection with my application for employment.

The execution of this release is voluntary. However, if Borough of Tipton is unable to secure the requested information, I understand that my application for employment may not continue to be processed.

COMMERCIAL DRIVERS LICENSE RELEASE OF INFORMATION FORM

I hereby authorize all current or former employers and any other individual or organization named or referred to in this Application to provide Borough of Topton with all information regarding my employment, work habits, character and applicable drug and alcohol test results for the previous two (2) years in accordance with applicable Department of Transportation regulations. I hereby release all such current or former employers, individuals, organizations and Borough of Topton from any liability for any claim or damage which may result from the release of such information. I understand that a photocopy of this authorization shall be valid as an original.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENTS

Date: _____

Signature: _____

Full Name (Print): _____