

Application for Employment

Qualified applicants received consideration for employment without discrimination because of race, color, national origin, age, sex, religion

OFFICE OF HUMAN RESOURCES

County of Schuylkill
401 N. 2nd Street
Pottsville, PA 17901
(570) 628-1216

Date of Application: _____

(PLEASE PRINT)

PERSONNEL INFORMATION:

NAME _____
Last First Middle

ADDRESS _____
Street City State Zip

TELEPHONE NUMBER(S) _____

ARE YOU 18 YEARS OLD OR OLDER? YES NO DRIVER'S LICENSE NUMBER _____

EMPLOYMENT DESIRED:

POSITION APPLYING FOR _____ STARTING DATE _____

WHAT OTHER WORK CAN YOU DO? _____

EMPLOYMENT DESIRED: Full Time Part Time Temporary

EDUCATION:

	School/Location	Graduated Yes / No	Diploma/ Degree	Major
High School				
College				
Vocational/ Technical				

ARMED FORCES EXPERIENCE:

Have you ever served in the Armed Forces of The United States? YES NO Length of Term _____ to _____
Month/Year Month/Year

Branch of Service: _____

RELEVANT INFORMATION:

Summarize any relevant educational details, experience, training (armed forces) or qualifications that have not been covered. Show special skills, certificates or honors won, etc.

Have you ever been convicted of a crime? YES NO If yes, please explain: _____

AN EQUAL OPPORTUNITY EMPLOYER

EXPERIENCE:

Employment in chronological order, starting from the most recent position and working backward. If you are presently employed, may we inquire of your present employer? YES NO

Employer Name _____ Telephone Number _____	Job Title & Duties: _____
Address _____ Ending Salary _____	_____
Employed From _____ to _____ Immediate Supervisor _____	_____
Reason for Leaving _____	_____

Employer Name _____ Telephone Number _____	Job Title & Duties: _____
Address _____ Ending Salary _____	_____
Employed From _____ to _____ Immediate Supervisor _____	_____
Reason for Leaving _____	_____

Employer Name _____ Telephone Number _____	Job Title & Duties: _____
Address _____ Ending Salary _____	_____
Employed From _____ to _____ Immediate Supervisor _____	_____
Reason for Leaving _____	_____

REFERENCES:

Give the name of three persons not related to you whom you have known at least one year.

	<u>Name</u>	<u>Phone</u>	<u>Years</u>
1)			
2)			
3)			

I authorize investigation of all statements contained within this application and understand that misrepresentation or omission of facts on this application is cause for removal of application from further consideration, or if employed, dismissal.

Signature

The County recognizes the applicant's request, if indicated under EXPERIENCE, to waive investigation with his/her present employer. However, should the County learn of negative or false information concerning applicant's employment history at any time during his/her employment, the County reserves the right to dismiss the employee on these grounds.

HUMAN RESOURCES DEPARTMENT USE ONLY:

Interviewer's Name _____ Date of Interview _____

Comments: _____

Hired YES NO Position Hired for: _____