



BOROUGH OF MOUNT JOY APPLICATION FOR EMPLOYMENT

An equal opportunity employer



LAST NAME

FIRST

MIDDLE INITIAL

PRESENT ADDRESS (STREET, CITY, STATE, ZIP)

PHONE NUMBER (DAY)

(EVENING)

SOCIAL SECURITY NUMBER

POSITION OR TYPE OF WORK FOR WHICH YOU ARE APPLYING: _____

PLEASE CHECK PREFERRED STATUS:

Full-time Part-time Seasonal No Preference Other : _____

DATE AVAILABLE TO START: _____

Are you over the age of 18? yes no If no, state your age: _____

Are you willing to work overtime, if necessary? yes no

Can you perform the essential duties of the job for which you are applying, with or without reasonable accommodation? yes no

Have you ever been convicted of a crime other than a minor traffic offense or are there charges presently pending against you for any crime other than a minor traffic offense? If yes, state the nature of the offense, date, city and state: _____

Disclosure of a criminal record will not necessarily disqualify you for employment consideration. Each offense will be evaluated on its own merit with consideration for job duties which you will be performing.

During the past ten years have you ever been involved in any work-related incident(s) which caused damage to facilities, equipment, property, or other persons? yes no

Do you have the legal right to work in the United States? yes no

RECORD OF EDUCATION (LIST SCHOOLS FROM WHICH YOU OBTAINED A DEGREE OR CERTIFICATION)

SCHOOL NAME	LOCATION	COURSE OF STUDY	DATES	DEGREE/CERT.
High School			XX XX	
College				
Graduate				

RECORD OF PREVIOUS EMPLOYMENT

(PROVIDE INFORMATION ON THE PREVIOUS 10 YEARS OF EMPLOYMENT. INCLUDE MILITARY SERVICE.)

PRESENT EMPLOYER		POSITION(S) AND / OR DUTIES PERFORMED
Name:	From:	
Street Address:	To:	
City, State, Zip:	Starting salary:	
Supervisor:	Phone Number:	Ending salary:
		Reason for leaving:

DOES YOUR PRESENT EMPLOYER KNOW YOU ARE SEEKING EMPLOYMENT ELSEWHERE? ___ YES ___ NO
 MAY WE CONTACT YOUR PRESENT EMPLOYER? ___ YES ___ NO

PREVIOUS EMPLOYER		MONTH / YEAR	POSITION(S) HELD AND DUTIES PERFORMED
Name:	From:		
Street Address:	To:		
City, State, Zip:	Starting salary:		
Supervisor:	Phone Number:	Ending salary:	Reason for leaving:

NEXT PREVIOUS EMPLOYER		MONTH / YEAR	POSITION(S) HELD AND DUTIES PERFORMED
Name:	From:		
Street Address:	To:		
City, State, Zip:	Starting salary:		
Supervisor:	Phone Number:	Ending salary:	Reason for leaving:

NEXT PREVIOUS EMPLOYER		MONTH / YEAR	POSITION(S) HELD AND DUTIES PERFORMED
Name:	From:		
Street Address:	To:		
City, State, Zip:	Starting salary:		
Supervisor:	Phone Number:	Ending salary:	Reason for leaving:

