

EMPLOYMENT APPLICATION

Equal Employment Opportunity Employer

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital status, sexual orientation or any other legally protected status. Applicants requiring accommodation in the application or hiring process should contact the Borough Office.

	(Please P	rint)			
Position(s) Applied For	•		Application		
How Did You Learn About Us?		I			
Advertisement	Walk-In				
Employment Agency	Other				
Last Name	First Name		Middle Name		
Last Ivallie	riist Name		Middle Name		
Address	City	State	Zip		
Telephone Number(s)		Social Secur	rity Number		
If you are under 18 years of age, can	you provide required proof o	f your aligibility to	work?	Yes	No
Have you ever filed an application w		If yes, gi			
Have you ever heen employed with		If yes, gi			
Are you currently employed?	us before.	11 y c3, g1			
May we contact your present emplo	ver?				
Are you a U.S. Citizen or otherwise l	•	oved in this countr	v?		
_	ration status will be required u	-	<i>,</i> .		
What date would you be available fo					
	ll Time Part Time	Shift Work	Temporary		
Are you currently on "lay-off" status	and subject to recall?	_			
Can you travel if a job requires it?					
Have you been convicted of a felony	or misdemeanor? Conviction wi	ll not necessarily disqua	lify an applicant from emplo	yment.	
If yes, please explain				<u> </u>	
Education					
Do you have a General Equivalency	Diploma(GED) or High School	Diploma?		Yes	No
T	1411				
Name	and Address			Diplom	a

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Undergraduate College				
Graduate Professional				
Other (Specify)				

Skills & Training

Describe any specialized training, apprenticeship, skills, and extracurricular activities.					
	ibe any job-related trai l States Military.	ining received in the			
e vo	ou requesting consider	ation of Veteran's status?	Yes	No	
	are, provide the follow	•			
	of Discharge:		Type of Discharge:		
	ication of Veteran's sta	tus may be required)	3.1	<u> </u>	
1.	ployment Expe	rience Start with your present o	or last job. Dates En From	nployed To	Work Performed
	Address				
	Telephone Number(s)				
	Job Title	Supervisor			
	Reason for Leaving				
	Employer		Dates Employed From To		Work Performed
2.	Address				
	Telephone Number(s)				
	Job Title	Supervisor			
	Reason for leaving	I			
	Employer		Dates Employed		Work Performed
3.	Address		From	То	Work renormed
	Telephone Number(s)				
	Job Title	Supervisor			
	Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business, or civic activities and offices held. You may exclude membership which reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:
Additional Information
Do you have a valid Driver's License? Y N /State of Issuance:/Driver's License No:
Police Dept. Applicants Only:
It is required that all Borough of Greencastle Police Officers and interested police department applicants hold a valid Act#120 (Pennsylvania Municipal Police Officers Training Commission) Certificate. Please provide your M.P.O.E.T.C number here:
Other Qualifications Summarize special job-related skills and qualifications acquired from employment or other experience.
State any additional information you feel may be helpful to us in considering your application.
Note to Applicants: Do not answer this question unless you have been informed about the requirements of the job for which you are applying.
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? Yes No

Personal References

1.	Name	Telephone		
	Address			
2.	Name	Telephone		
	Address			
3.	Name	Telephone		
	Address			
Profe	essional References Do not include any individuals who are related t	o you.		
1.	Name	Telephone		
	Address			
2.	Name	Telephone		
	Address			
3.	Name	Telephone		
	Address			
Applicant's Statement				
I certify that the answers given herein are true and complete to the best of my knowledge.				
an em releas	orize investigation of all statements contained in this application for employing ployment decision. I hereby authorize all current and former employers, educe information relevant to my application for employment and I release the Boyers, educational institutions, and references from any and all liability relate	ucational institutions, and references to orough, all current and former		
	pplication for employment shall be considered active for a period of two (2) plered for employment beyond this time period should inquire as to whether one.			
any er	by understand and acknowledge that, unless otherwise defined by applicable nployment relationship with this organization is of an "at will" nature, which ne and the Employer may discharge Employee at any time with or without ca	means that the Employee may resign at		
In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.				
	Signature of Applicant	Date		